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ABSTRACT

This document presents the final report of a study undertaken to: (1) identify and describe programs and services provided to prepare and support adolescents in their transition from supervised substitute care placements to independent living; (2) describe the differences between adolescents who received independent living services and those who did not; and (3) develop recommendations for service delivery models to improve agency-provided programs and community resource services for adolescents facing independent living. Part One of this two-part report contains seven chapters. Chapter 1 outlines the study's development, purpose, and objectives. Chapter 2 reviews study methodology. Chapter 3 presents the framework in which independent living services are defined. Chapter 4 discusses state-of-the-art independent living services. Chapter 5 presents the development and implementation of independent living services in Arizona, Colorado, Georgia, and Virginia; and chapter 6 summarizes the characteristics of adolescents discharged from care in those four states. Chapter 7 presents study conclusions. Part Two of this report delineates program and policy issues for child welfare professionals to consider when designing independent living services. The five chapters in this section present questions about current service delivery systems, discuss service implementation issues, provide a directory of 59 independent living programs, give a resource listing of articles and curricula on independent living services, and provide independent living subsidy policies from five states. An executive summary, appendices (containing frequency tables, case record sampling strategies, and data analysis), exhibits, figures, and 19 tables are included. (NB)

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FOR
YOUTH IN SUBSTITUTE CARE

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INDEPENDENT LIVING SERVICES
FOR
YOUTH IN SUBSTITUTE CARE

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EXECUTIVE SUMMARY

BACKGROUND

Presently, child welfare agencies are faced with rising proportions of adolescents in substitute care, and the responsibility for providing cost-effective services to meet the independent living needs of youth about to be discharged. Before such adolescents are discharged, they need to be prepared to live on their own and make the transition to adulthood and self-sufficiency. Their needs include the ability to successfully obtain adequate housing, get a job, maintain positive social relationships, and perform necessary daily living skills.

In 1984, approximately 40 percent of the more than 275,000 children in substitute care in the United States were between 13 and 20 years of age. It has been estimated that less than one in four of these adolescents would ever return to their own homes. In fact, in 1984, some 16,000 adolescents were discharged from care because they had reached the age of majority -- as opposed to being placed in some other permanent living arrangement. A substantial number of these youth were discharged without having been adequately provided the skills necessary to achieve self-sufficiency.

Adolescents leaving substitute care do not all need the same types of services to prepare them for independence. Some have had more successful substitute care experiences than others; have been able to develop nurturing and stable relationships with their foster parents; and have developed the living skills they will need for a smooth transition to independence and community life.

Some adolescents about to leave substitute care have been emotionally damaged throughout their youth, and the emotional attachments and social support structures they will need to bridge the transition to independence have not yet been formed. Still other youth are lacking in basic skills such as budgeting, locating an apartment, securing employment, even shopping for food and preparing their meals. They simply may not have an adequate support structure available to them, once they are discharged from care, which could assist them in developing these necessary skills of daily living. Therefore, a broad and diverse spectrum of services is required to help meet the individual skill development needs of adolescents facing discharge from care as they are reaching the age of majority.

The Study of Independent Living Services for Youth in Substitute Care was undertaken because the available literature regarding independent living programs for dependent adolescents was limited. There was a need on the part of Federal, state and local program managers and service providers for increased information on the range of services available as well as how to design and implement these services. Also, the barriers that state and local programs are facing in implementing independent living services/programs needed to be identified. Information on the characteristics of youth who were receiving independent living services vs. those who were not receiving such services was needed to ensure that all youth would be adequately prepared for independence. Finally, a description of the skill levels and support systems of adolescents leaving substitute care was needed in order to develop independent living services/programs which address the specific needs of youth facing discharge.

The following research objectives were developed to address these key informational needs:

(1) Describe the differences between adolescents who received independent living services with those who did not receive such services;

(2) Identify and describe programs and services provided by public and private agencies that are designed to prepare and support adolescents in their transition from supervised substitute care placements to self-sufficient, independent living; and

(3) Develop recommendations for service delivery models designed to improve agency provided (direct/purchased) programs and community resource services for adolescents facing independent living.

FINDINGS

Experiences youth obtain in care and resources they have at the time of discharge. Information was collected from the agency case records of the study sample to ascertain the experiences and resources youth had available to them at the time of discharge. These experiences and resources included: level of education obtained, job experiences while in care, the opportunity to experience an independent living arrangement, the types of independent living services provided, and the amount of contact with parents before discharge.

- Thirty-four percent of the 18 year olds discharged from care had completed high school. Youth discharged from care after 18 finished high school or obtained a GED more often (51% of the 19 year olds, 65% of the 20 year olds, and 77% of the 21 year olds). However, youth remaining in care after age 18 were given support primarily to insure that they finish their schooling.

- The average number of services provided youth varied depending on whether the youth were from a state which had a defined independent living program of services or were from a state which generally left the development of services to individual caseworkers. The two states which had more defined programs provided more services to youth (6 and 11 services) compared to the states without defined programs (1 and 3 services).

- The service most likely to be provided to youth was psychological counselling (45%). Only four other services were provided to at least 35 percent of the youth. These included information about relationships and social skills (39%), job search information (39%), sex and birth control information (37%) and budgeting skills (35%). The extent and quality of the information provided by each of these services was not delineated in the case record. Therefore we were not able to examine the thoroughness of service provision, only whether or not there was indication in the case record that the youth had received the service.

- Forty-seven percent of the biological mothers and 28 percent of the biological fathers had visited the youth during their last year in care. This finding exemplifies the lack of social supports, particularly parental support, youth have at the time of discharge.

- Youth in care were discharged with minimal experience in living on their own (15% had experienced independent living arrangements). Many of the youth had to experience living on their own without any prior practice. For many youth lack of preparation also included lack of training in basic living skills, no high school diploma, and/or lack of a support system to turn to once they were discharged.

- The service area in which youth were provided the most experience before discharge was employment (62% of the youth had had at least one job while in care). Many of the caseworkers stated that it was not difficult to help youth find a job, but it was difficult for youth to maintain a job. The youth might be fired because they would consistently show up late or have trouble taking instruction. In other instances youth would quit, contending "the job was boring, did not pay enough money, or expected too much from them." Caseworkers indicated they did not have the appropriate training to provide job counselling and they felt that other resources needed to be used to provide this service to youth. The states which appeared to have the best employment rates for youth in substitute care were those states in which the agencies made use of funds and services from job service programs and the Joint Training Partnership Act (JTPA) services.

Characteristics related to receipt of independent living services. Analyses were conducted to ascertain whether specific demographic and case history characteristics predicted receipt of independent living services. The case record abstract outlined 18 different services that could have been provided to youth while in care. In assessing the impact of the demographic and case history characteristics, a youth was considered to have received services if she/he had received any one of the possible 18 services. Receipt of independent living services was found to be related to the following demographic and case history characteristics.

- Female and disabled youth were more likely to receive independent living services, particularly personal and health related services.
- Youth who had received more visitation by their parents were also more likely to have received personal and health related services.
- Youth who experienced more living arrangements were more likely to have received independent living services.
- Youth who spent three to five years in substitute care were more likely to have received services.
- Youth who received a recommendation of independent living from periodic reviews and dispositional hearings were more likely to have received services.

Definition of independent living services. Because of the diversity in the definition of independent living services, one goal of this study was to provide a conceptual framework in which to define independent living services. The conceptual framework developed identifies the skills and attributes that a young person needs to have in order to be successful when on his/her own.

The skills and attributes include both resource skills (e.g., educational, vocational, money management) and functional skills/attributes (e.g., decisionmaking, self-esteem, interpersonal relationships). It then describes preparation for independent living not as a singular event but as a series of events that occur along a continuum. This continuum reflects four developmental phases most young people go through as they move toward adulthood.

Phase I, Informal Learning:

Basic living skills are acquired informally by observing family members, repeating methods or techniques that have been observed, and through trial and error.

Phase II, Formal Learning:

Skills are taught through formal institutions and formalized activities. Often someone outside the family is providing the instruction.

Phase III, Supervised Practice:

The learning is primarily experiential. The youth is no longer living with the adults who are responsible for parenting and now resides in some type of supervised independent living situation.

Phase IV, Self-Sufficiency:

The young person is living independently without the benefit of a safety net.

Each phase incorporates the learning of resource and functional skills during the natural course of life events. For example, some basic living skills are acquired informally during Phase I while accompanying a family member to the supermarket. Phase III experiences (supervised practice) might occur during college dormitory life where the youth has experienced a change in living arrangement, but there is still the safety net of their parents if they run into a problem.

The range of independent living programs and services can be defined within this continuum. An example of Phase I programs/services is special training to foster parents so they are better prepared to use daily living experiences in teaching basic living skills. Phase II services include group sessions in which resource and functional skills are taught. Typically, youth meet in groups ostensibly to learn the resource skills. Functional skills are introduced through the resource skills. For example, interpersonal relationships might be explored through doing activities surrounding the selection of roommates.

Phase III programs/services enable youth to move out on their own before the substitute care commitment is set aside, thus enabling youth to practice their skills. Phase IV programs would make it possible for those youth who were no longer under the care and custody of the child welfare agency to receive additional instruction and support on an as needed basis.

Policies. Another goal of the study was to collect information about state policies affecting the planning needs of older youth.

- Forty-seven states have a policy to maintain youth in care past their 18th birthday. However, the stipulations placed on remaining in care limit the number of such youth who are served (e.g., youth must be disabled, actively participating in school).
- Fifteen states have independent living subsidy policies that provide payment to youth for maintaining a residence of their own while they are still in the care and custody of the public child welfare agency. Twelve other states provide subsidies through residential treatment centers or on a case by case basis.
- Ten states have policies which require the provision of independent living services to youth facing discharge, and 15 states have policies which support the provision of these services. These policies range from simple statements which merely indicate that adolescents should be prepared for living on their own when they are discharged from care to policies that require services be provided to adolescents.

Programs and services. Through the compilation of a national directory of independent living programs, and site visits to independent living programs in four states, information was collected on the variety of services currently being provided to youth facing discharge from care. This report includes a discussion of these services and programs in a chapter on the state of the art and a directory of 59 programs. The state of the art chapter presents the services as they relate to each phase of the continuum described earlier.

In general, the services/programs that have been developed include:

1. Informal Independent Living Concepts:
    - Out of home placements (foster homes, group homes, residential treatment centers) which have incorporated informal independent living concepts in their daily living arrangements.

- Adolescent units which place an emphasis on preparing youth for self-sufficiency.

2. Formalized Training Programs:

   - Individual/group training provided by public agency caseworkers, foster parents, group homes, residential treatment centers, contracts with private providers, and/or agreements with other public agency programs.

3. Supervised Practice Living:

   - Apartment living with agency staff on premise.

   - Apartment living without agency staff on premise (agency leased or youth selected and leased).

4. Self- Sufficiency:

   - Scholarship programs.

   - Drop-in centers.

   - Volunteer programs.

   - Followup services.

The program directory was compiled through interviews with professionals from each of the 59 programs and includes a description of the program as well as the problems and successes that have been faced in program implementation. Agency professionals stressed the importance of providing experiential learning processes for youth. For example, job search skills are taught through visits to the workplace and interviews with employers. The home management skills are best taught by having youth prepare meals.

Many of the agency respondents also emphasized that the teaching of independent living skills cannot wait until a youngster is facing discharge. The youth's faith in his/her own capabilities, emotional readiness, and decisionmaking skills must be incorporated into the services provided youth from the time they enter care.

CONCLUSION

The study findings have highlighted the need to focus more attention on the delivery of services to adolescents in substitute care, specifically services to help promote a successful transition to self- sufficiency. Examination of the exit of the substitute care system revealed that youth being discharged from care frequently did not have the skills to become self sufficient adults. A majority of the youth studied did not have their high school diplomas, lacked training in basic living skills, and did not have a support system to turn to once they were discharged from care.

One of the reasons for this is the nature of the substitute care system itself. Substitute care services were originally developed to provide a protective environment for youth coming from abused, neglected, and abandoned environments. A major purpose of the system was to meet the dependency and security needs of these children. However, this process has sometimes neglected to balance protection with growth and self- sufficiency.

Additionally, permanent planning has focused on preventing foster care placement, and finding permanent living arrangements for youth who have been placed in substitute care (e.g., return home, adoption). This emphasis has been successful in curtailing foster care drift by increasing the likelihood that permanent living arrangements would be found for youngsters. However, in some instances it has narrowed the scope of permanent planning to providing a living arrangement, rather than concentrating on the long range needs of all youth in care, no matter what their future living arrangement will be. This has been particularly detrimental to adolescents in substitute care for whom return home or adoption have not always been viable alternatives.

By broadening the concept of permanency planning to incorporate the continuum of independent living services, permanency planning does not have to be limited to a living arrangement, but can encompass the individual needs of youth in substitute care.

This does not require the development of a new delivery system, but will involve the redefining of certain service delivery components and the expansion of some resources. For example, a viable resource to help prepare youth for independent living is the informal training that can occur in the youth's current living arrangement, whether it be a foster home, group home, or residential treatment center (Phase I of the continuum).

In this way self-sufficiency training can be provided to youth throughout their foster care experience. Agencies can develop guidelines which outline the expectation of caregivers to provide opportunities for youth in their residence to problem solve, make decisions, be involved in planning and preparing meals, and so on. In many instances this will involve broadening caregivers' understanding of the developmental needs of youth, and specifically the developmental lags that youth in substitute care might be experiencing. This changing role for caregivers would require specialized training and technical assistance. It would not eliminate the need for other resources to help teenagers acquire some of the specialized skills needed for self- sufficiency. However, it does allow for the preparation of youth to be incorporated throughout their substitute care delivery experience and not just when youth are facing discharge.

The study findings indicate that in order for youth to be prepared for living on their own, other issues also need to be addressed. Specifically, the coordination between the public school system and the child welfare system. As described earlier, less than half of the 18 year olds discharged from substitute care left with a high school diploma. This raises many questions about why youth in substitute care are not completing high school as well as what role child welfare agencies can play in alleviating this problem.

The lack of contact youth have with their natural parents during their last year of care exemplifies the lack of social supports, particularly parental support, youth have at the time of discharge. In order for youth to continue with their lives and to develop intimate relationships, they need to understand the dynamics of their family relationships and the past rejections they experienced. Youth must also be offered the opportunity to develop relationships while in care that will be available to them once they are discharged. Some agencies have made excellent use of volunteers in the community to help bridge this transition.

States have made substantial efforts to develop services to meet the needs of adolescents who will be discharged from care to live on their own. Policies are being implemented, services are being developed. The service gaps are being identified, but a systematic and comprehensive approach to providing services for this population is not always being pursued. States are incorporating programs which are reaching limited numbers of youth. There are a variety of ways to develop and implement independent living services. This report provides information about the options that states may choose to assess their current delivery systems and ascertain how to effectively impact the needs of the adolescent populations they are serving.

1. INTRODUCTION

Approximately 16,000 adolescents were discharged from substitute care in 1984 because they had reached the age of majority (American Public Welfare Association, 1985). For the most part these adolescents are expected to reenter the community and to be self-sufficient without the aid of a social service delivery system or a family to provide support. As one child welfare administrator aptly stated, "the 'magic stroke of midnight' theory takes effect."

Once an adolescent is emancipated, s/he must be ready to live on his/her own and make the transition to adulthood. This transition for adolescents in foster care is complicated by the fact that they may have been abused or rejected, and possibly faced multiple disruptions in their family situations. For these young people, the transition to independence can be an abrupt and fearful experience.

All adolescents approaching adulthood are faced with complex issues of adjustment. There is a need to develop a sense of identity so that one can trust his/her ability to separate and individuate. Erik Erikson maintains that the individual must have a sense of continuity of experience to enable him/her to bridge what they were as a child and what they are about to become. Adolescents in substitute care who have frequently faced abuse, neglect, and/or rejection, often have a weakened and diffused sense of identity, and may therefore have less resiliency with which to face independence. Not only must they face independence in a weakened state, but very often they must face it alone.

The adolescent in substitute care often has to experience repeated emotional and physical separation from both their biological and foster family. These repeated separations complicate the socialization and attachment process for adolescents in substitute care. Adolescence is a time of striving for independence and searching for identity and can be complicated by the fact that an adolescent has had many people making decisions that affect his life course. The adolescent has been a client in a system which fosters object relationships between the adolescent and adults. Decisions are made for the adolescent, by people he/she may never have met. This situation also creates an environment for adolescents in which they have little control, emphasizing a feeling of powerlessness.

Because agencies and their workers are oriented towards "protection and care," needs are met at an administrative level and through interagency agreements, which lessen the opportunity of adolescents to learn about skills necessary for daily living. Realistically, it is impossible to substitute for the nurturing and consistency that the adolescent in substitute care has lacked. However, concepts of best practice require that those youth whose goal is to remain in substitute care until they are old enough to be discharged be provided with the supportive services they need to move them toward independent living and productive adulthood.

The current trend in substitute care to ensure permanency planning for the youth it serves has inadvertently neglected an approach to substitute care services which allows youth to acquire the social, emotional and basic skills necessary for transition to adulthood and independence. The focus has been on finding permanent living arrangements for children and providing protection, but not necessarily providing the services required to promote independence in youth, no matter what their living arrangement will be. This has been particularly detrimental to adolescents in substitute care. In 1984, approximately 40 percent of all children served by the substitute care system were 13-20 years old (American Public Welfare Association, 1985). The percentage of adolescent children in substitute care in New York City nearly doubled in the last decade (Lash, Sigil, and Duzinski, 1980). Finding permanent placements for these adolescents does not look promising. Although approximately 85 percent of the adolescents in substitute care have parents whose parental rights have not been terminated, it has been estimated that less than 20 percent of the adolescents in substitute care return to their birth homes (Hornby and Collins, 1981). Hornby and Collins also estimate that about one adolescent in 20 currently in foster care is likely to be adopted.

Presently, child welfare agencies are faced with rising numbers of adolescents in foster care and the responsibility of providing cost effective services to ensure that when these adolescents are discharged from foster care they can obtain housing, get a job, maintain positive social relationships, and perform necessary daily living skills. Adolescents leaving substitute care do not all need the same type of services to prepare them for independence. Some adolescents have had successful foster care experiences, have been able to develop nurturing relationships with their foster parents, and develop the independent living skills which will allow them to make a successful adjustment. Other adolescents have been emotionally damaged throughout their youth, and the emotional attachments and social support structures they need to bridge the transition to independence have not been formed. Still other adolescents are lacking in basic skills such as budgeting, locating an apartment, finding a job, cooking a meal. They will not have a support structure available to them once they are discharged from foster care. A broad spectrum of services must be available to meet these individual needs of adolescents facing independence.

Child welfare personnel have indicated that youth need to be given the tools to deal with special situations that arise because they are in agency custody or they do not have a meaningful involvement with their birth family. They need to learn the answers to such practical questions as:

- How do I complete parts of a job application if I nor my foster parents have the answers to questions about (i.e., place of birth, name(s) of elementary school(s), childhood illnesses)?
- When I go to rent a place to live and they want my parents' name and address, what do I say?
- What do they mean on a credit application, next of kin not living with you?
- How do I get medical insurance if the job I get or the school I attend does not offer it?
- What name should I put down for a person to notify in case of emergency?
- What do I say if the reason I left my last job was because I came into foster care?
- Where do I turn if I am sick or lonely or in trouble?

For the adolescent who has been unable to develop enduring emotional attachments and has a great deal of difficulty relating to other individuals, support structures need to be developed. Often these adolescents resist individualized attempts to meet their emotional needs, and must be approached in a non-threatening manner. The fields of education and mental health have developed a variety of methods to reach these adolescents. It has been found that adolescents are more responsive to learning and exploring their needs and feelings when provided a group setting in which they can be given concrete tasks to conquer. By providing an atmosphere in which tasks are practical and success can be shared, adolescents also have the opportunity to openly discuss their fears and concerns. This technique can be applied to the adolescent facing discharge from substitute care. By providing group settings in which independent living skills are taught (i.e., budgeting, finding a job, etc.) a benign atmosphere can be established in which adolescents are not only learning practical skills, but they are given an opportunity to deal with their fears and concerns about independence. Also, support structures are developed and adolescents are encouraged to interact with other adolescents and adults in a productive manner. Other adolescents leaving foster care need the experience of living alone while still being a part of the social service system. For these adolescents, supervised practice living arrangements (including subsidized apartments, boarding home, etc.) are necessary.

In response to these issues, a continuum of independent living programs is being established throughout the country for adolescents leaving substitute care. For example, some residential group care agencies have developed community-based programs to prepare adolescents for independent living. Such programs range from counselling to supervised living arrangements, and serve delinquent, dependent and/or emotionally disturbed youth. In other states, agencies have developed some independent living arrangements as well as vocational and educational training programs for adolescents in foster care who are facing discharge.

Currently the available literature concerning independent living programs for dependent adolescents is limited. There is a need on the part of Federal, state and local program managers and service providers for improved information on the range of services available as well as how to design and implement these services. The study of Independent Living Services for Youth in Substitute Care was undertaken in an effort to meet these key informational needs.

The purpose of this study was to provide an overview of state policies, programs and services currently being developed to prepare youth for independent living. Also, information on the barriers that states and local programs are facing in implementing independent living services/programs needs to be identified. Information on the characteristics of youth who are receiving independent living services vs. those who are not receiving such services is necessary to ensure that all youth are being adequately prepared for independence. Finally, a description of the skill levels and support systems of adolescents leaving substitute care need to be documented in order to develop independent living services/programs which address the specific needs of youth facing discharge.

The following research objectives were developed to address the overall purpose of this study.

(1) To identify and describe programs and services provided by public and private agencies that are designed to prepare and support adolescents in their transition from supervised substitute care placements to self-sufficient, independent living;

(2) To describe the differences between adolescents who received independent living services with those who did not receive such services;

(3) To develop recommendations for service delivery models designed to improve agency-provided (direct/purchased) programs and community resource services for adolescents facing independent living.

This Final Report of the study of Independent Living Services for Youth in Substitute Care describes the study findings as they relate to the basic research objectives listed above. The report is organized into two parts. Part One has seven chapters. Chapter One outlines the issues which precipitated the development of the study, the purpose of the study, and the study objectives. Chapter Two provides an overview of the study methodology. Chapter Three presents the framework in which independent living services/programs are defined. Chapter Four discusses the current "state of the art" with respect to independent living services policies and models that have been implemented throughout the country. The development and implementation of independent living services in four study states -- Arizona, Colorado, Georgia, and Virginia -- is presented in Chapter Five. Chapter Six summarizes the characteristics of adolescents who were discharged from care in the four study states. Conclusions growing out of the study findings are presented in Chapter Seven.

Part Two delineates program and policy issues for child welfare professionals to consider when designing and implementing independent living services/programs. Part Two has five sections. The first section presents questions for child welfare professionals to consider about their current service delivery systems for planning and implementing independent living services. The second section provides a discussion of issues about implementing independent living services that were identified by public and private child welfare professionals. Section three is a directory of 59 independent living programs. The fourth section is a resource listing of articles and curricula on independent living services. Independent Living Subsidy policies from five states are provided in section five.

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2. METHODOLOGY

2.1 Data Collection Procedures

The methodology utilized for the study of Independent Living Services for Youth in Substitute Care involved four separate data collection activities to obtain information about the development and implementation of independent living services. This chapter provides a summary of the data collection activities carried out over the course of the project. Detailed backup is provided in Appendices A-C, which includes frequency tables for the findings from the case record abstracts (Appendix A), a description of sampling activities (Appendix B), and analyses activities (Appendix C).

The data collection activities for this study included:

- Collection of information about independent living services and policies throughout the country through a review of existing literature and informal discussions with selected public child welfare agency personnel in order to describe the state-of-the art;
- A case study approach exploring and describing four states' efforts to develop and implement independent living services/programs;
- Abstraction of cases records of adolescents 16-21 (from the four study states) who had been discharged from care to obtain case histories, demographic information, and information about the types of preparation youth received before discharge;
- Informal discussions under the auspicies of state agencies with adolescents in the study states who had been discharged from substitute care and were currently living on their own.

2.2 The State of the Art

A variety of data sources were used to gather information about the state of the art. These sources included a thorough review of existing literature, contact with regional office program specialists to identify model programs in their region, informal telephone discussions with state administrators in 25 states and telephone calls with public and private child welfare agencies who provide independent living services/programs. In all our contacts we asked for suggestions about other independent living services and programs with which the respondent was familiar.

A network was established of various organizations and individuals who were collecting information about independent living services and policies in order to share information and materials. All of this information was compiled and is summarized in Chapter 4, the State of the Art, in a directory of independent living programs (Part II), and in a resource listing of articles and curriculums about independent living services and programs (Part II).

2.3 Agency Case Studies

2.3.1 Selection of Study States

Four states were selected to participate in the study. These included Arizona, Colorado, Georgia, and Virginia. These states were purposively selected using selection criteria which were specifically intended to guide a sample of study states that provided a range of agency, service population, and geographic characteristics.

The purposive criteria used in the selection of the study sites were as follows:

- States which had policies, services and agency programs representing the continuum of independent living services for adolescents;
- States which had a sufficient number (100) of adolescents who were discharged from substitute care between September, 1984 and August 31, 1985;
- States which had independent living services in both urban and rural settings;
- States which represented varying sizes of substitute care populations. States were stratified by the size of their substitute care population. Presently 57 percent of the substitute care population is found in ten states. The next 20 percent of the population is divided among 10 more states. The remaining 23 percent of the population is divided among 30 states. Since states with similar size substitute care populations are likely faced with similar program

and financial concerns, states were selected from each category. See Figure 2-1 for a listing of states by substitute care population.

Finally, each states' willingness to participate in this study was a key determinant of its selection. Agency administrators and staff needed to be willing to spend many hours with Westat personnel during the data collection period. They also needed to be willing to assist the teams in a variety of ways, such as compiling lists for sampling case records and pulling together written policy materials and statistics.

During January through May, 1986, site visits lasting an average of five days were conducted by Westat project staff to each of the four states selected for the study. Depending on the types of services available, and the distribution of these adolescents by program states (ILS/nonILS), the number of counties visited in each state ranged from two to eight. During the site visits, groups and or individual meetings were conducted with a wide range of public and private agency personnel who were directly involved in the issues around developing and implementing independent living services. In general, discussions were conducted with the following types of people:

- Key agency administrators, including the state agency administrators, appropriate program directors and assistant program directors;
- Substitute care unit supervisors;
- Any other agency staff or consultants involved in independent living service efforts; and
- Program administrators and key staff from private agencies providing independent living services.

The state and local public agency administrator(s) in each state were asked to identify the other key public and private agency personnel who would participate in the meetings, although they were provided a list in advance showing the general categories of participants desired. Community-based participants were identified and contacted directly by project staff in some cases, and were referred to the Westat project staff in other cases.

Figure 2-1. Listing of states by size of substitute care population

10 States with highest substitute care population account for 57%	10 States with next highest substitute care population account for 20%	30 states with next highest substitute care population account for 23%	
California	Florida	Alabama	Montana
Illinois	Georgia	Alaska	Nebraska
Maryland	Louisiana	Arizona	Nevada
Massachusetts	Minnesota	Arkansas	New Hampshire
Michigan	Missouri	Colorado	New Mexico
New Jersey	North Carolina	Connecticut	North Dakota
New York	Oregon	Delaware	Oklahoma
Ohio	Texas	District of Columbia	Rhode Island
Pennsylvania	Washington	Hawaii	South Carolina
Virginia	Wisconsin	Idaho	South Dakota
		Indiana	Tennessee
		Iowa	Utah
		Kansas	Vermont
		Kentucky	West Virginia
		Maine	Wyoming

The discussions which occurred during the site visits focused on the following major issues:

A. Adolescent Substitute Care Caseload Characteristics

- Agency definition of adolescent (e.g., ages included);
- Number of adolescents in care;
- Goals assigned to adolescents in care, specifically number of adolescents with the goal of independent living; and
- Number of adolescents discharged from substitute care and reason for discharge.

B. Laws, regulations and funding mechanisms pertaining to the type of services the agency can provide adolescents

- Laws and regulations which affect provision of services to adolescents (e.g., emancipation laws, substitute care licensing regulations, state laws pertaining to independent living subsidies, and any other laws/regulations); and
- Regulatory and statutory barriers which affect the provision of services to adolescents.

C. Policies and Procedures Regarding Adolescents in Substitute Care

- Prevalent philosophy regarding placement and facilities, case planning, case management, and service goals for adolescents in substitute care;
- Timing and structure of case reviews and dispositional hearings;
- Attitudes toward use of reunification services for adolescents in substitute care;
- Attitudes, policies and practices concerning adoption for older children and adolescents;
  (1) agency established age limits
  (2) adoption as a case plan goal for older and adolescent children

  - (3) experience with efforts to place older and adolescent children for adoption.

- Description of any specialized training for foster parents who provide care to adolescents
  - (1) Type of training
  - (2) Scope of training
  - (3) Special foster parent characteristics
  - (4) Foster parent incentives
- Major problems agency faces in providing services to adolescents; and
- Major differences between adolescents who came into care as adolescents, compared to adolescents who have been in care for an extended length of time (e.g., problems they face in their transition to independent living).

D. Independent Living Services

- Definition of independent living services;
- Policies and procedures governing the selection and assignment of adolescents to independent living services;
- Specific independent living services and programs available.
  - Service provider
  - Goals and objectives of the program
  - Staffing and methods of service delivery
  - Description of services and activities
  - Admissions process and/or eligibility criteria
  - Availability and coverage of services (applications, slots, waiting list statistics)
  - Service definitions
  - Strengths and weaknesses

E. Community Resources

- Resources available in the community to assist adolescents in their efforts to achieve self-sufficiency;
- How these resources are integrated with independent living services provided by the child welfare agency; and
- Agency personnel's perceptions of adolescent's ability and/or willingness to use community resources.
- Specific issues which impact the adoption process for minority children such as barriers to placement stemming from the legal and court systems or from particular agency policies or practices.

In addition to holding discussions with selected agency personnel on the topics outlined above, the site visit personnel also collected and received a wide range of written materials pertaining to each agency's's policies and procedures regarding its independent living services, as well as available statistical reports describing each agencies adolescent substitute care caseloads. A summary of the findings from the site visits is presented in Chapter 5.

2.4 Case Record Abstracts

The third component of the data collection involved selecting a stratified random sample of youth who had received independent living services and those who did not. The purpose of abstracting selected case records was to obtain data which could be used to compare the case characteristics of adolescents who had received independent living service and those who did not. The case record abstract data was also used to identify the skill level, support systems available, and presenting problems of adolescents discharged from foster care. The sampling frame from which the sample of cases was drawn in each site was defined as all 16-21 year old adolescents in the care and custody of the public child welfare agency who were discharged from care between September 1, 1984 and August 31, 1985.

Each state agency was asked in advance of the site visits to prepare a list of all adolescents in the agency's care who met the sampling criteria. The actual sample of cases was then drawn by the Westat staff. (Rules governing the size of the child samples drawn in each site, and other aspects of the sampling methodology emphasized for this component of the study, are presented in Appendix B to this report.)

In most of the study states, staff of the public agency (generally substitute care caseworkers) were recruited, trained and hired by Westat staff on-site to perform the actual abstracting of case records. In the sites in which caseworkers did not abstract the case records either former employees of the public welfare agency or Westat staff completed the abstracting.

All of the persons who performed the case record abstracts were trained in the use of the abstract form and on the standard data item definitions established for the study. Westat provided each abstractor with a Case Record Abstract Instruction Manual containing detailed instructions on how to complete the forms, standard data item definitions, and examples of how to classify case record information in conformance with the guidelines established for this study.

Adolescent and case characteristics data collected through the case record abstract form included the following general categories:

Demographics

- Sex
- Age
- Race
- Education
- Disabling condition
- Location of biological mother
- Location of biological father
- Family source of income at the time of entry and at discharge

Extent of Substitute Care Experience

- Time elapsed since data case was opened and discharge
- Time elapsed since first entry into substitute care and discharge
- Time elapsed since date of last reentry into substitute care and discharge

Nature of Foster Care Experience

- Primary reason for removal from home
- Time elapsed since date of birth and date of first placement
- Number and history of living arrangements while in substitute care
- Number of runaway episodes while in substitute care

Whether or not youth was placed in adoptive home
Disrupted/dissolved adoptive placement experiences
Substitute care placement experiences through another system
Number of times parents contacted youth during last year of substitute care

Case Management and Review

Initial case plan goal for youth
Recommendation from most recent periodic review
Recommendation for most recent dispositional hearing
Time elapsed between periodic review and dispositional hearing
Whether or not independent living services were included in review recommendations

Independent Living Services Received

Specific types of Independent Living Services provided
Number of adolescents who received Independent Living Services
Length of time post placement services received
Reasons youth was selected for Independent Living Services

No identifying data were collected on children whose records were abstracted. Each sampled case was assigned a unique numerical identifier established by Westat, and the case number assigned by the agency was used only to permit secondary data retrieval, if required. All completed abstract forms were returned to Westat for editing, coding and data entry.

The following chapters provide the results of these data collection activities.

3. DEFINITION OF INDEPENDENT LIVING SERVICES

In order to present information about independent living services and programs, it is important to first clarify what is meant by these terms. Currently, there are no commonly agreed-upon definitions. In fact, there seems to be a great deal of confusion among child welfare professionals about what independent living services and programs should be. For example, a group home in one part of the country that implements a new policy requiring its residents to plan menus and cook meals is said to have an independent living component. Another group home that has had a similar requirement for many years regards its food service system as part of traditional group home care.

The best way to reach consensus about a definition for independent living services and programs is to first identify the skills and attributes that a young person needs to have in order to be successful when on his/her own, and then to look at how and when the skills are being taught. A partial listing of the basic living skills would be the following:

Resource Skills

Educational skills
Vocational skills
Job search skills
Money management
Home management
Consumer skills
Locating and community resources
Use of Transportation
Health care
Locating housing
Understanding the law

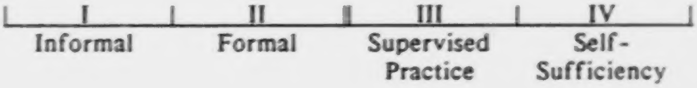
Functional Skills/Attributes

Decision making
Problem solving
Planning
Communication skills
Interpersonal relationships
Time management
Self-esteem
Confronting anger and past losses, rejections
Social skills
Preparing for transition to independence and termination from substitute care

The two lists are purposely separated, with the one on the left representing the resource skills (tangible skills) for the acquisition, utilization, or allocation of resources and the one on the right representing the functional skills (intangible skills) necessary for everyday living. After reviewing these lists, two thoughts come to mind:

1. While the tangible skills are often first associated with independent living, knowledge of the tangible skills alone is virtually useless unless accompanied by some degree of proficiency in the intangible skills;
2. It takes a long time, perhaps a lifetime, to master both sets of skills.

Developmentally, one begins to acquire these basic living skills at a very early age and continues to refine and perfect them throughout one's lifetime. It makes sense then, to view preparation for independent living not as a singular event but as a series of events that occur along a continuum. The continuum might look something like this:



During Phase I, basic living skills are acquired informally by observing family members, repeating methods or techniques they have observed, and through trial and error. New skills are often introduced when daily living situations require it. For example, a young child who accompanies his/her parent to the store observes how groceries are selected and purchased. Eventually, the parent will ask the child to go to the store alone to make a purchase. The child has the opportunity to practice what she/he has learned through observation. The practice experience may be positive or negative. Either way, the child obtains new information that can be used in other shopping experiences.

During Phase II, basic living skills are acquired through formal instruction and formalized activities. For many young people this formal instruction is provided as part of an educational program or extracurricular activity. Often someone outside of the family is providing the instruction. Formal instruction may occur individually or in groups. A practice component may or may not be part of the program. Through such activities as Boy Scouts, Future Homemakers of America and sports, children learn and acquire functional skills (interpersonal skills, planning, communication, self-esteem, as well as the resource skills (i.e., money management, consumer skills).

A Phase III learning experience is primarily experiential. The || line on the continuum indicates that the young persons's living arrangement has changed. The youth is no longer living with the adults who are responsible for parenting and now resides in some type of supervised independent living situation. This situation provides the opportunity for the youth to practice all of the skills that have been learned formally and informally. While the youth practices the skills in a real life situation, the supervision component minimizes the possibility that the inevitable mistakes will have a life-threatening effect. For many young people, college dormitory life or military life provides a Phase III learning experience. The college freshman and the new Army recruit are away from home and technically on their own, but there is still a safety net under them as they begin to try their wings.

The Phase IV living experience is differentiated from Phase III in that during Phase IV the young person is living independently without the benefit of the safety net. The young person is viewed as an adult and expected to pay his/her own way. However, for many young people there still remains a life line to the adults who are responsible for the parenting (i.e., loans, social support, a place to be for major holidays). During Phase IV the young adult may seek to improve basic living skills through either the formal or informal methods. Such assistance is not automatically provided. It is made available only if the young adult requested it, and in some situations, has the ability to pay for it (i.e., calling home to get a recipe or signing up for a cooking course).

Most young people go through the phases outlined in the continuum as they move toward adulthood. However, the age at which one enters a phase may vary greatly. For many young people there is no pressure to move into a Phase III or Phase IV situation. In fact, many young people choose, for a variety of reasons, to delay moving away from home until they are in their mid to late twenties. Quite often the move away from home is accompanied by a positive event such as obtaining a good job or getting married. The move away from home usually comes with the support and encouragement of a parent who is still willing and able to lend a helping hand if things don't work out.

Unfortunately, most youth in the substitute care system do not have the option of remaining in a protected family environment until they are ready to move out on their own. Phase IV must be achieved by the age of 21 and in many cases by the age of 18. Often this move is not accompanied by a positive event and no parent is available to lend a helping hand. For many youths in substitute care this situation is compounded by past rejections, unstable placements, and poor interpersonal relationships. These disruptions have prevented basic living skill learning to have occurred in the natural course of events. For these reasons, help with movement along the continuum is more critical for youth in foster care. Special efforts must be made to ensure that accepted skill levels (resource and functional) have been reached by the time they emancipate from the system. Independent living programs and services, must therefore, be defined as those programs and services that have an identifiable method for teaching both the resource and functional skills. The methods may vary according to where the program or service is placed along the continuum. However, the instruction must be purposeful, not accidental and with specific learning objectives and outcomes in mind.

An example of Phase I programs/services is special training to foster parents so they are better prepared to use daily living experiences in teaching basic living skills. The foster parent clearly understands that preparing youth for independence is part of the job description and knows how to turn a daily living situation into a learning experience. The foster parent is also trained to introduce skills to meet the youths age and maturity level.

Phase II programs/services provide special instruction to augment the formal instruction that may be occurring in school and other social activities. Typically, youth meet in groups ostensibly to learn the resource skills. Functional skills are introduced and taught through the resource skills. For example, interpersonal relationships might be taught through doing activities surrounding the selection of roommates.

The best Phase II programs also incorporate experiential experiences. Job search skills are taught through visits to the workplace and interviews with employers. The home management skills are best taught by having youth prepare meals for the group.

Phase III programs/services enable youth to move out on their own before the substitute care commitment is set aside, thus enabling youth to practice their skills. Supervised apartment living and subsidy programs are designed to simulate total independent living arrangements.

Phase IV programs/services make it possible for those youth who are no longer under the care and custody of the child welfare agency to receive additional instruction and support on a needed basis. These programs and services are designed to simulate the life line that exists in many families.

The need for independent level services is being addressed at both the state level and local agency level. Ultimately there needs to be a full range of services available so that regardless of where a youth is living, they will have access to the services to help make a positive transition to adulthood. Currently, some states have one or more independent living programs available and some agencies offer a full range of services covering the continuum. However, a comprehensive program of services for youth in a state system does not exist.

The following chapters will outline those programs/services that have identifiable methods of teaching the resource and functional skills along the continuum. The various options are provided to allow administrators, program planners, agency directors, etc. to choose those services that are necessary to meet the needs of the youth they are serving. The continuum can be used as a framework to identify where the particular service gaps currently exist in your service delivery system.

4. STATE OF THE ART

This chapter provides an overview of the "State of the Art" of independent living services programs. The chapter is divided into two sections. Section 1 outlines the current state policies addressing independent living services. A description of the numerous types of independent living service models is presented in Section 2. A directory of programs which have been implemented throughout the country is found in Part II. This directory is not an exhaustive list of programs that exist, but provides examples of the service models discussed in this chapter.

4.1 Policies

In recent years state child welfare policies have concentrated on ensuring permanent planning for youth in foster care. The major focus of this process has been to reunify children with their natural parents or to find adoptive placements for them. Adoption and/or reunification are not always viable alternatives for older youth in foster care. Consequently, the permanency planning needs of older youth who have been in care for many years or who have come into care as teenagers have not been adequately addressed. Therefore, there has been a lack of policy that clearly states the philosophy, planning procedures, and service requirements for older youth facing discharge from care to their own responsibility.

This study has collected information about state policies in the following five areas:

(1) Maintaining youth in substitute care after age 18;

(2) Independent living subsidies;

(3) Policies which require and/or support independent living services;

(4) States which are developing policies; and

(5) Policies which include independent living as a case plan goal.

Exhibit 4-1 provides an overview of the states which have indicated the existence of policies in each of the categories.[1] There is variation in the policies within each of the categories. A description of these policy categories and the variation within the categories is presented below.

Maintain Youth in Care After Age 18. Forty seven states indicated there was a policy to maintain youth in care past their 18th birthday. However, the stipulations placed on remaining in care included:

- Youth can remain in care till 19 in order to finish high school (6 states).
- Youth can remain in care till age 21 in order to finish a vocational training program or school or if the youth is handicapped (24 states).
- Youth can remain in care to finish high school, age limit of 19 or 21 is not stipulated (8 states).
- Youth can remain in care past age 18 and until 19 through 21 because they need further services and do not have to be in school or vocational program (9 states).

The majority of these policies stipulate that care past age 18 is on a voluntary basis. States were divided in how they used these policies. Some states indicated that due to financial reasons they encouraged substitute care to end at 18. Other states used their policy to prolong substitute care placement as long as possible in order to allow youth to finish school.

Independent Living Subsidy Policies. A subsidy policy allows states to provide payment to youth to maintain a residence of their own while they are still in the care and custody of the public child welfare agency. Currently there are states which have written policy delineating subsidy payments and states which are providing subsidies either through residential placements or on a case by case basis. As is presented in Exhibit 4-1, 15 states have

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[1] Information on policies was collected from three sources:

1. Westat's informal conversations with state administrators.
2. A Children's Defense Fund/American Public Welfare Association survey of state agencies regarding efforts on behalf of teens in foster care to prevent pregnancy or to support pregnant and parenting teens.
3. Virginia Commonwealth University mail survey of state independent living service policies.

Exhibit 4-1. Independent Living Policies (Continued)

STATE NAME	Can retain youth in substitute care after age 18			Independent Living Subsidy Policy/Program			Policies which require/support independent living services, programs and/or responsibilities			Policy being developed			Have independent living as a case plan goal		
	YES	NO	UK	YES	NO	UK	YES	NO	UK	YES	NO	UK	YES	NO	UK
Missouri	MO			MO[3]				MO			MO		MO		
Montana	MT				MT			MT		MT					MT
Nebraska			NE		NE			NE		NE					NE
Nevada	NV			NV				NV			NV		NV		
New Hampshire	NH				NH			NH		NH				NH	
New Jersey	NJ			NJ					NJ	NJ			NJ		
New Mexico	NM			NM			NM[5]			NM			NM		
New York	NY			NY[2]			NY[4]			NY			NY		
North Carolina	NC				NC		NC[5]				NC		NC		
North Dakota	ND				ND			ND			ND			ND	
Ohio	OH					OH		OH				OH			OH
Oklahoma	OK				OK		OK[5]			OK			OK		
Oregon	OR			OR			OR[4]				OR		OR		
Pennsylvania		PA			PA			PA			PA		PA		
Rhode Island	RI			RI[3]				RI		RI			RI		
South Carolina	SC			SC[3]			SC[5]			SC			SC		
South Dakota	SD				SD			SD		SD			SD		
Tennessee	TN				TN			TN		TN			TN		
Texas	TX			TX[2]			TX[5]			TX			TX		
Utah	UT			UT			UT[4]				UT		UT		
Vermont	VT			VT[3]				VT		VT					VT
Virginia	VA			VA			VA[5]				VA				
Washington	WA				WA		WA[4]				WA		WA		
West Virginia	WV			WV			WV[4]				WV		WV		
Wisconsin	WI				WI		WI[5]			WI			WI		
Wyoming	WY			WY[3]				WY		WY					WY

1. Being developed
2. Subsidy paid through licensed provider
3. On a case by case basis.
4. Policy requires services
5. Policy supports services

Exhibit 4-1. Independent Living Policies

STATE NAME	Can retain youth in substitute care after age 18			Independent Living Subsidy Policy/Program			Policies which require/support independent living services, programs and/or responsibilities			Policy being developed			Have independent living as a case plan goal		
	YES	NO	UK	YES	NO	UK	YES	NO	UK	YES	NO	UK	YES	NO	UK
Alabama	AL				AL			AL			AL		AL		
Alaska	AK				AK			AK			AK		AK		
Arizona	AZ			AZ			AZ[5]			AZ			AZ		
Arkansas	AR					AR		AR		AR			AR		
California	CA				CA		CA[5]					CA			CA
Colorado	CO			CO			CO[5]				CO		CO		
Connecticut	CT			CT			CT[5]			CT			CT		
D.C.	DC			DC[2]			DC[5]			DC					DC
Delaware	DE					DE		DE				DE		DE	
Florida	FL			FL			FL[4]				FL		FL		
Georgia	GA				GA		GA[5]			GA			GA		
Hawaii	HI				HI			HI			HI				HI
Idaho	ID				ID			ID				ID	ID		
Illinois	IL			IL			IL[4]					IL	IL		
Indiana	IN			IN			IN[4]			IN			IN		
Iowa	IA			IA			IA[4]			IA			IA		
Kansas	KA			KS[2]			KS[5]			KS			KS		
Kentucky	KY				KY[1]			KY		KY			KY		
Louisiana	LA				LA			LA				LA	LA		
Maine	ME			ME			ME[5]			ME				ME	
Maryland	MD			MD[2]				MD		MD				MD	
Massachusetts			MA	MA[2]				MA		MA					MA
Michigan	MI			MI[3]			MI[4]				MI		MI		
Minnesota			MN			MN			MN			Pnv			MN
Mississippi	MS				MS			MS		MS				MS	

1. Being developed
2. Subsidy paid through licensed provider
3. On a case by case basis
4. Policy requires services
5. Policy supports services

indicated they have an independent living subsidy policy, and six states provide subsidies on a case by case basis. Six states require that subsidy payments be channeled through a licensed facility. For these six states, licensed facilities have contracts with state and county child welfare agencies to supervise and make payments to youth residing in their own apartments, boarding homes, etc. This is often accomplished by contracts for residential treatment centers specifying that a certain number of "beds" or slots purchased be used for independent living arrangements.

The subsidy policies in the 15 states range from very specific policies which outline such issues as eligibility criteria; agency role, parents' or guardians' role, the amount of the subsidy, the youth's responsibilities -- to policies which simply indicate that a subsidy can be paid. Part II includes presents policies from the states of Arizona, Florida, Oregon, and West Virginia. These policies, as well as those from other states, address the issues outlined above in the following ways.

- Eligibility Criteria: Policies vary in the ages in which independent living arrangements can be subsidized. Illinois and West Virginia stipulate that the youth must be 17 and not yet 21 years of age, whereas Florida, Colorado, and Oregon policies only require a youth to be 16 years old. Study respondents indicated that most youth were not ready for independent living arrangements until they were at least 17 years old. Most policies require the youth to be in the custody of the agency for at least six months, and/or currently employed or enrolled in school or a training program. There is variation as to whether or not a youth must have the goal of independent living and whether or not the court must sanction the placement. Policies also vary on the extent to which youth must demonstrate they have obtained the basic skills necessary for beginning independent living. For example, in some states actual participation in a basic skills course is required while other states rely on the caseworker's judgment as to whether or not the youth has acquired the necessary skills.

- Agency Role: Some state policies provide explicit instructions for the agency, and particularly the caseworker with regards to agency supervision of an independent living arrangement (see Florida policy as an example). In all instances, the number of contacts with the youth is specified. These range from weekly to monthly contacts. The agency approval process is also outlined in the policies. Some states require all levels of administration (from local to state office) to sign off on the arrangement. In many instances the department is responsible for the cost of medical and dental expenses. However, some states have indicated that if a youth is not in a licensed facility, medical and dental payments cannot be provided.

- Parent/Guardian Role: Most state policies also require that the youth's parent or legal custodian provide written approval if the youth is under 18.

- Amount of Subsidy: The base amount of subsidy paid to youth ranges from $300-$500/month. In general, the subsidy amount is based on a minimum wage salary for a forty hour week. Some states also provide a one time start up cost to cover security deposits or other essentials the youth might need to purchase. The amount of the youth's contribution to his living arrangement varies by state as well as by the youth's circumstances. Some policies require that the youth be able to contribute at least $100/month. Also, in some states the agency contribution is reduced $1.00 for $1.00 by the amount the youth can contribute, whereas other states reduce their contribution by 50 cents for every $1.00 the youth contributes.

- Youth's Responsibility: Other responsibilities of the youth outlined in policy may include signing a contract to enter into an independent living arrangement, keeping appointments with caseworkers, maintaining a job and/or schooling, and staying out of trouble with the law. Consequences for youth who do not uphold their responsibility usually result in removal from the placement. As would be expected, consequences are often determined on an individual basis.

Policies which require and/or support independent living services. Twenty-five states reported they had policies which required and/or supported independent living services, while 24 states reported they did not. Independent living subsidy policies are not included in this category. Although 25 states did indicate they had a policy which required or supported independent living services, in many instances the policies are very minimal (10 state policies require and 15 state policies support independent living services). They are simple one line sentences which state that adolescents should be prepared for living on their own when they are discharged from care. There is no discussion of how this should be done or who is responsible for providing the service. Other states outline individual independent living services or programs that are available on a statewide basis. Part II presents such a policy from Illinois which outlines service options for subsidy programs, an employment program, and a college scholarship program. Other examples of state policies include the recently drafted

Massachusetts policy which addresses residential programs as well as independent living services for all adolescents 16-18 who have explored all other family alternative living situations and who are willing to begin to assume responsibilities for themselves. This policy outlines services required, duration of the program and program models. These models include staffed apartments for youth to financial support for adolescents who are about to leave their family or foster home. The policy stipulates that all children are entitled to permanent plans, and for some older youth this plan means ensuring that youth can achieve independent living. In order to accomplish this goal the policy details the skills that youth need to acquire, including daily living skills, finding community services, planning and completing appropriate schooling, securing employment, and maintaining relationships.

Michigan has recently developed a policy which requires all private care institutions that take foster children to develop a supervised independent living program as a condition of receiving a contract.

There is a growing awareness of the needs of older youth in substitute care. However, at this time the majority of states are lacking comprehensive and systematic policies which address the transition needs of this population. As discussed earlier, this population is growing and there is a wide range of services that need to be available to ensure that the goal of permanency planning is also achieved for adolescents. Statewide policy outlining the states philosophy and comprehensive service options is critical to ensuring a states' commitment to the development and implementation of independent living services.

Policies which include independent living as a case plan goal. Currently, there are 34 states which have incorporated independent living as a case plan goal for those youth where reunification or adoption are not viable alternatives. The age in which independent living may become a goal ranges from 14-17 years old. Having the option of independent living as a goal is necessary to accommodate the options for all youth in care. It also highlights the circumstances of many youth facing discharge so that appropriate services will be provided. However, there has been concern that this goal not be used as a "dumping ground" to avoid finding other permanent placements for youth. It is often difficult and frustrating to find adoptive placements for adolescents or provide the services necessary for reunification with families. It is important that these avenues be thoroughly explored before deciding that a goal of independent living is the only viable alternative.

States which are developing policies. In the survey conducted by Virginia Commonwealth University, 28 states reported they were currently developing independent living service policies. Some of these states were modifying current policies while other states were developing policies for the first time. The number of states interested in developing policies for independent living services underscores the concern of the states in providing services for adolescents facing discharge from foster care.

4.2 Independent Living Services and Programs

Currently a variety of independent living services and programs have developed throughout the country.

The initiatives for these programs have come from both the public and private child welfare agencies. In some instances group homes or residential treatment centers identified a need for services which helped the older adolescent facing discharge acquire skills to promote self-sufficiency. In other instances the initiatives have come from public child welfare agency caseworkers who were frustrated and concerned about the lack of relevant services and preparation available for adolescents facing discharge. In most cases these services/programs have developed in isolation rather than as a systematic approach to providing a continuum of services for adolescents in care. However, many of these programs do incorporate one or more aspects of the service continuum presented in Chapter 3 (informal training, formalized training, supervised practice, and self-sufficiency).

Exhibit 4-2 presents a chart of the continuum of independent living service models available. A brief description of these service models is provided below. Part II presents a directory of programs which use these models. The directory includes a description of the program, implementation problems the programs have faced, and recommendations from the programs for providing independent living services.

Exhibit 4-2. Continuum of Services*

I. Informal Independent Living Concepts

1. Adolescent Units.
2. Out of Home placements (foster homes, group homes, residential treatment centers) which have incorporated informal independent living concepts in their daily living arrangements.

II. Formalized Training Programs

1. Public agency caseworkers providing group/individual skill training.
2. Foster parents providing skill training to youth in their homes.
3. Formalized training programs within residential treatment centers and group homes. May include experiential training components.
4. Contracts with private providers to provide skill training to youth.
5. Agreements with other public agency programs to provide skill training (e.g., job training).
6. Youth conferences.

III. Supervised Practice Living

1. Apartment living with agency staff on premise.
2. Apartment living without staff on premise.
   - Agency leased
   - Youth selected and leased
     - Boarding homes
     - House sharing
     - Apartment

These programs may be provided through public agency subsidy programs or through residential treatment centers and group homes.

IV. Self Sufficiency (After Care)

1. Scholarship Programs.
2. Drop in centers.
3. Volunteer programs
4. Followup services.

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*Some group homes and residential treatment centers have incorporated all four service areas in one program.

4.2.1 Out-of-Home Placements Incorporating Informal Independent Living Concepts in Daily Living Arrangements

As discussed in Chapter 3, Stage One of the continuum of services includes those independent living skills that are taught informally within a youth's substitute care placement. This is one aspect of service delivery that is not being used to its fullest potential. Development of independent living skills is a process that individuals acquire throughout the developmental stages of growth.. Children in foster care for short periods of time as well as those who grow up in care need to be in living arrangements which promote independent thinking, skill practice, and self-esteem. Unfortunately current living situations do not always have these goals. Instead, dependency is promoted in many of the current out of home placements. This occurs through foster parents who do not encourage children in their homes to problem solve, caseworkers who do not include youth in case planning, or group homes or residential treatment centers which promote dependency through planning and cooking all meals for youth, and having regimented programs which do not encourage youth to be responsible for such things as getting themselves up in the morning. Promoting independency does not negate the need for structure and nurturing that youth need while in substitute care. It does however, require a rethinking and sometimes restructuring of current programs. There are some foster home, group home and residential treatment programs which have incorporated a philosophical framework of promoting independency within their daily routines. Others have begun to incorporate experiential independent living concepts into their daily living routines. However, in most instances these situations are for older youth and are labeled "transition" or independent living programs and include formalized skill training components. (These specific programs are discussed in Section 4.2.2).

There appears to be a need for public child welfare agencies to encourage service providers to modify their approaches for the type of living arrangements they are creating for children in substitute care. This can be accomplished through contract requirements, training of foster parents, and training of caseworkers to approach service delivery with the intent of encouraging youth to be involved in decision making, problem solving, and every day tasks (e.g., helping with shopping, cooking, washing clothes) which will prepare them to be self-sufficient adults.

4.2.2 Formalized Skill Training Programs

Many youth in foster care have not had the opportunity of learning independent living skills informally, or even through formalized programs such as the Boy Scouts, after school clubs, etc. Also, children come into care from situations which were abusive and neglectful, and often with delayed developmental skills (educationally, socially, emotionally). These programs need to address the resource as well as functional skills necessary for promoting self-sufficiency. As described in Chapter 3 these skills include:

Resource Skills

- Educational
- Job Readiness and Training (e.g., career counselling, job search application and interviewing skills, work experience and maintaining a job
- Use of transportation (obtaining a drivers license)
- Money management
- Locating Housing
- Health Care
- Shopping and cooking
- Locating and Using Community Resources
- Consumer Skills (e.g., insurance, taxes)
- Understanding the law

Functional Skills/Attributes

- Social Skills
- Communication Skills
- Decisionmaking
- Problem Solving
- Interpersonal relations
- Planning
- Preparing for transition to independence and termination from substitute care
- Self-Esteem
- Confronting anger and past losses, rejections
- Interpersonal relationships

Many formalized skill training curricula have developed throughout the country. A listing of some of these curricula is presented in Part II. Currently the curricula stress resource skill development rather than functional skill development. Some states and agencies have addressed the functional skill development through group therapy sessions, private counselling, developing relationships with volunteers and casework services. Also some formalized groups for teaching resource skill development have incorporated the functional skills within the curriculum. For example, decisionmaking skills are emphasized in helping youth explore the type of housing they will look for and whether or not it is best to live with a roommate. Also, when discussing many of the resource skills that youth must master, the emotional fears and concerns of youth are addressed.

Providers of formalized skill training programs contacted for this study emphasized that skill training needs to be experiential and must not be approached in an academic manner. Formalized skill training is being implemented in a variety of ways. These options include:

- Caseworkers running groups with youth using such workbooks as Making it on Your Own, the New York State Curriculum or handbooks put together by the caseworkers themselves;
- Foster parents being trained to teach skills within the foster home. In these instances already established workbooks are used;
- Formalized training programs within group homes and residential treatment centers (See Directory);
- Contracts with private service providers to develop and provide skills training for youth living in their own homes, foster homes, or other residential settings;
- Agreements with other public agency programs such as Employment and Training, Joint Training Partnership Act (JTPA) to provide job skill training;
- Youth conferences in which 20-40 youth are brought together for day long or weekend workshops to practice independent living skills.

4.2.3 Residential Care Facility Models

Residential care facilities (group homes and residential treatment centers) have developed a variety of models to provide independent living services to older youth in their care. These models include:

- Group homes and residential treatment centers (RTC's) with formalized skill training components and experiential training;

- Group homes and RTC's which have an independent living arrangement component;
- Group homes and RTC's which provide a continuum of services including formalized skill training, experiential learning, independent living arrangements, and after care service.

The directory of programs has examples of programs which use each of these models. In this section, a general description of each of these models will be provided.

Group Homes, RTC's With Formalized Skill Training Components and Experiential Training. Although the residential care facilities categorized in this group share the program components of formalized training and experiential learning, they implement the programs in different manners. For example, a program in Florida, the Florida Sheriff's Boys Ranch incorporates independent living skills training into the experience of being part of a working ranch. Skill training is also provided through a campus school and vocational exploration program. Experiential learning occurs through cottage management (e.g., shopping, cooking) and gaining a sense of accomplishment by learning to run a tractor, ride a horse, etc.

The "Lemon Grove" program run by the Casey Family Program in Boise, Idaho, has developed a life skills curriculum, requires youth to pay rent and to be responsible for doing their own laundry, cooking, etc. Weekly group sessions with youth are also conducted. The program provides opportunities for vocational training and uses volunteer advisors as career role models. The group home was developed in 1979 when it was found that adolescents reaching the age of emancipation could be divided into the "successful emancipator" who needs little formal support, and the "resistive emancipator," who fights against her/himself. The independent living project was developed for "resistive emancipators."[2] Over the past six years the program has undergone changes, specifically in the area of allowing youth to take more responsibility for themselves through their every day activities.

Other residential settings with skills training and experiential learning have incorporated level systems within their programs. In these systems, youth receive more privileges and independence as they complete each level. Levels are based upon youth's behavior and accomplishment of independent living skills. The providers we spoke with had mixed opinions about using level systems in developing independent living skills for adolescents. On the one hand it was felt that youth in substitute care (especially in residential settings) were so used to structured environments that they had to be systematically provided freedom and responsibility. Providers of less structured independent living settings indicated that level systems did not prepare youth for the real world. In fact, it was felt that level systems were more for the benefit of staff than the youth in the programs. This in not to say that older youth are automatically ready for taking on more responsibility and freedom, but that the structure needed to be internalized, and level systems did not encourage this internalization process. In some of the settings which did not use level programs, youth were involved in developing the rules of the household and peer pressure and natural consequences were incorporated into the program.

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[2] Mazerall, Hildegarde, A. Emancipation from Foster Care. Child Welfare, Jan/Feb. 1983, LXII #1,p. 46-54.

Experiential living arrangements are also being used in many of these residential settings. These types of living arrangements have been separated from the next category of independent living arrangements because they include youth still living as a group with more extensive supervision. A few examples of these situations include the "Training for Independence Program" provided by Group Homes for Children in Lafayette, Indiana, the McCrossin's Boy's Ranch in Sioux Falls, South Dakota, and the Elon Home in North Carolina. The Training for Independence Program is licensed for six girls ages 16 1/2 and 18 and uses a life skills curriculum as well as experiential life skills learning through maintaining the group home facility. The McCrossin's Boy's Ranch is a residential treatment center which includes an on-campus apartment unit maintained by 4-8 youth. The Elon Home is a residential child care agency which has an 11-18 month level program to teach life skills, employment, etc. There are also on campus cottages which provide youth with experiential learning experiences before transitioning to independence.

Group Homes and RTC's Which Have an Independent Living Arrangement Component. Many group homes and RTC's are incorporating an independent living arrangement component for youth to actually experience living on their own, with minimal supervision. These arrangements range from living arrangements with 24 hour on site supervision provided by agency staff to youth living in their own apartments with weekly to monthly supervision. In some instances the agencies hold the leases to the apartments and in other situations youth are responsible for selecting and leasing the living arrangement. These living arrangements might include rooms in boarding homes, house sharing, or individual apartments.

Some agencies such as the Hope Center in Houston, Texas provide these living arrangements in an apartment complex. Youth live in individual apartments within an apartment complex with a staff member also maintaining residence in the complex. Agencies have also made use of married housing facilities on college campuses and vacant dormitories to provide independent living situations with a staff member living on the premises. In these situations there is 24 hour staff supervision with youth maintaining their own apartments or dormitory rooms.

The "Transition to Independent Living Program" in Greenfield, Massachusetts provides four, two-bedroom apartments, without supervision on the facility for youths aged 16-21. These apartments are jointly funded and maintained through a combination of public resources (Department of Social Services, Housing Authorities and Community Development Corporation). The youth must maintain a full day program (education or vocational training), participate in a life skills program, attend a bi-weekly support group and maintain a savings account.

Group Homes and RTC's Which Provide a Continuum of Services. Some group homes and RTC's have developed a continuum of independent living services for youth in their care. These programs include formalized skill training, semi-supervised living arrangements, practice living situations and after care services.

The New England Home for Little Wanderers Adolescent Cluster Program is one example of this type of program. The program includes a range of services to prepare adolescents for adult life. These components include an experiential living unit (Tier 1), a supervised independent living unit (Tier 2), after care services (Tier 3), and an alternative living component (Tier 4).

The services are provided on a continuum basis. Adolescents begin in the experiential living unit which is a small apartment living unit with 24 hour live in staff. Four to six girls live in this experiential unit at any one time. Skill training is provided to the adolescents while living in this group apartment situation. After the adolescent has been in Tier 1 for one year they can enter Tier 2. In this arrangement, the adolescent finds an apartment or room in a boarding house and is subsidized by the agency for at least 6 months. The after care component (Tier 3) provides support services as needed to those adolescents who have completed other phases of the program. Fiscal support is discontinued during this phase.

Tier 4, is for adolescents already living on their own or in foster homes who need support services, basic skills, and educational training.

The Children's Home in Tampa, Florida is a residential treatment center which has developed a continuum of services for older adolescents. This program has experiential life skills training, a cottage for the "pre-independent" population and then apartment living subsidized by the agency until the youth is self-sufficient. Initially, the apartments were leased by the agency. However, because of some problems with youth behavior in the apartments as well as the realization that youth needed to have more of a sense of responsibility about the apartment, the agency is now requiring that the youth sign the lease. After care services are also provided to the youth once they have been discharged from care.

4.2.4 Self-Sufficiency

Once adolescents have been discharged from foster care there are little, if any, services provided to them. There are some program models developing. A few of these examples include drop-in centers such as The Door in New York City, the Center for Youth Services in Washington, D.C., and the Ozone House in Ann Arbor, Michigan. These programs provide services to youth who are currently living on their own and may need help in obtaining health care, housing, employment, education, and/or social support.

The On Your Own program in Baltimore, County Maryland serves older adolescents aged 16-21 who are not eligible or appropriate for existing child welfare services. In most instances youth are about to leave foster care situations, family situations or are already living on their own. The program provides individualized goal planning services in such areas as housing, employment, vocational training, peer and family relationships and referral to and linkages with community resources. It is the contention of the program coordinator that youth are not always ready to deal with these issues when they are in a structured environment. Therefore, there have to be services available for youth when they are actually living on their own. The services are provided by staff members who work with youth individually and in groups. It also requires financial resources to meet minimum needs for a client population with little or no financial resources of their own.

Other options for after care programs include identifying and matching youth with a volunteer while in foster care who will maintain a relationship and provide a support system once the youth has left care. In some instances agencies recruited and screened volunteers themselves. Some agencies have used community volunteer programs such as Big Brothers and Big Sisters. Agency personnel indicated that it was important to screen and match volunteers with youth very carefully. Also, foster parents might become threatened by volunteers, and so it was necessary to provide foster parents with information about the volunteer program.

Some agencies concentrate on coordinating community resources for youth to contact once they have left care and provide youth with a community resource handbook. As discussed earlier, after care services have also been incorporated into some group home and residential treatment center programs by providing a short period of followup services. These services including counselling, group sessions, financial support and scholarship programs.

Although there are some after care services being provided, this is one area of service delivery that has had minimal attention.

4.2.5 State and County Run Independent Living Programs.

The major program run through state and county public child welfare agencies is the independent living subsidy that is provided to youth to live on their own while still in the care and custody of the agency. Subsidy programs were discussed in Section 4.1, State Policies. As discussed earlier, these programs are being developed as alternative living arrangements and vary in the populations they are serving, their funding mechanisms, and other program stipulations. One area of concern that has arisen around these programs is that in some cases youth are being placed in these programs without any prior skill training, and with minimal supervision. In some instances this is happening because youth have refused to remain in any other type of living arrangement and agency personnel do not know where else to place the youth. On the other hand, some agencies are very cautious about placing youth in independent living arrangements, and are only placing those youth who would adapt to living on their own after substitute care, whether or not they experienced an independent living arrangement. Both of these situations indicate that in developing subsidy programs, eligibility criteria needs to be established which meets the needs of the adolescent population being served. Preparatory skills need to be provided, and proper assessments of the youth entering the program need to be made.

State subsidy programs also face funding problems. As independent living arrangements are not licensed families, federal funding and often state funds cannot be used to make direct payments to youth. Some states have overcome this problem by 1) passing state laws which allow state funds to be used for direct subsidy payments to youth and 2) have subsidies paid to a licensed third party (RTC, foster parent) who in turn provides the youth a subsidy.

Public child welfare agencies are also implementing adolescent units. Specialized caseloads are certainly not a new concept in the field of child welfare, and units with workers who have caseloads of adolescents have been in existence in some states for a long time. These units were created because it was felt that the adolescent substitute care population had unique problems which were best addressed by workers who had an expertise in working with adolescents. Also the problems posed by adolescents are often frustrating, requiring the support of other caseworkers in a unit. With the rising concern over preparing adolescents for independent living the concept of adolescent units has been expanded in some states. For example, the Young Adult Program in Arizona is comprised of two adolescent units, one in Phoenix and one in Tucson. The units were developed to serve youth in the substitute care system 16 years of age or older whose case plan goal was independent living or long term foster care. The youth can be living in a foster home, group home, residential treatment center or on their own. There is a cap of twenty youth per full time worker and the workers are responsible for developing individual plans with each adolescent to help prepare them for discharge from substitute care and living on their own. These plans include providing supportive casework, matching a youth with a volunteer, and developing plans with youth to procure jobs, education and/or training, securing counselling and therapeutic services, and enrolling youth in a basic skills training program. Adolescents have an entry interview before being accepted into the program and sign a contract acknowledging their commitment to participate in the available services. A further discussion of how this adolescent unit fits into the continuum of services being developed by Arizona is discussed in Chapter 5.

Other state or county run independent living programs include a combination of skills training and independent living arrangements administered directly by the local public welfare agencies. Colorado and Arizona have developed such programs. Descriptions of these programs are provided in Chapter 5.

5. STATE APPROACHES TO INDEPENDENT LIVING SERVICES

Four state visits were conducted to collect detailed information on how states were approaching the development of independent living services, to identify the types of youth receiving independent living services, and to describe the situations of youth discharged from substitute care (e.g., education level, support systems available). The four states were chosen to represent varying degrees of program development and service implementation to provide the reader with information about the current range in services being provided to adolescents. As it was inappropriate to do comparisons of the service delivery systems between the four purposively selected states (Georgia, Virginia, Arizona, Colorado), the states have been identified as A-D rather than by name. The descriptions of the states are not presented in the order listed above. This chapter includes descriptions of:

- The range of laws and policies which affect provision of independent living services to adolescents;
- The reasons each state began to plan for and develop independent living services;
- The range of independent living services available in each state; and
- The major problems and barriers states faced in implementing independent living services.

5.1 Overview of State Policies

Each of the states visited had policies pertaining to the delivery of services to youth in substitute care who were facing emancipation. Three of the states had independent living subsidy policies which allowed the direct payment of a subsidy to a youth to maintain their own residence while still in the care and custody of the agency. These policies ranged from having very specific guidelines on the eligibility criteria, subsidy amount, agency's role and youth's role to very loose guidelines. The two states with looser guidelines were state supervised, county administered and left the details for the payment of the subsidies to the individual counties. Two of the states had to change their state laws in order to provide subsidies. The need for change in state law was dependent upon whether or not the law had restricted payments to licensed facilities, thus prohibiting youth from receiving payments directly.

The three subsidy programs also differed in the number of youth receiving payment and the reason for providing payment. One state had limited the use of subsidy to those youth who were screened very carefully and the agency felt were "responsible" young adults. This state had approximately 12 youth, statewide receiving subsidy at the time of the site visit. The two other states have had subsidy policies since the late 1970's. However, in one of these states the policy was rarely used. There were approximately 20 youth statewide receiving subsidies in this state. State and local personnel had indicated they did not feel independent living arrangements were very beneficial to youth. The counties visited in the third state were using subsidies as an integral part of their independent living programs. Personnel in these counties indicated that in many instances youth selected for independent living arrangements had been those who were not able to make it in other types of living situations. Only one of the three states had specifically tied the receipt of independent living skills training with independent living arrangements.

Three of the states had identified independent living as a goal for youth while one state did not use this goal. Only one state had outlined in policy the type of skills a youth should have mastered before "emancipating." This particular state did not have a subsidy program. However, the policy only identified the services that should be provided and left the provision of services to individual counties and their caseworker's initiative.

All four states had policies which allowed youth to remain in care after the age of 18. One of the states stipulated that youth could volunteer to stay in care until age 19 in order to finish high school or a training program. The other three states permitted youth to remain in care until 21. One state required court approval for extension to age 21. The other two states were much more flexible about retaining youth until 21 years of age. In fact, one of these states did not even require that youth be enrolled in an education or vocational training program.

5.2 State A

Child welfare services in State A are delivered through a state administered system. The impetus for the development of independent living services came from the state office. State personnel identified that one third of the foster care youth had a goal of either independent living or long term foster care. In order to meet the needs of these youth, the concept of a Young Adult Program was designed. The original program served youth in two counties which served approximately 75 percent of the foster care population. The program was initially funded through a federal grant (October 1983 to March 1985) and since then has been continued by the state. The program was developed to provide independent living services to youth 16-18 years old. Initially, it included the following components:

- Adolescent units with caseworkers who were selected because of their commitment to working with adolescents;
- An advisory board of public and private agency members to provide linkages between community resources and the child welfare agency;
- Adolescents who had a desire to be in the program, participated in an entrance interview and entered into a written contract to participate;
- Contracts with private agencies to provide training in independent living skills;
- Emphasis on education and vocational skills; and
- A volunteer matched with the youth to provide friendship, encouragement, and a resource for the youth once they were discharged from care.

An assessment of each youth was done to establish a program tailored to meet the individual needs of the youth. The worker and youth then developed an individual plan for the youth's transition to self-sufficiency. Each worker maintained close contact with the youth in their caseload to provide support and encouragement throughout the program. Adolescents who participated in the Young Adult Program reported that the relationships they developed with their caseworkers were the most important aspect of being in the program. The relationships helped them to believe that they were going to succeed once they were discharged from care.

A comprehensive approach to the delivery of services to youth facing discharge from care was the basic premise for program development in this state. The Young Adult

Program was designed to provide this comprehensive approach. However, as the program progressed, state and local personnel became aware of the needs that still remained in service delivery. Some of these needs included:

- The use of the subsidy program for a broader range of youth -- the subsidy program originally was targeted for 17 and 18 year olds. It was found that limiting the program to this age group was too narrow because some youth were not ready to experience independent living arrangements until they were 19. Also, the program was only being provided to youth who were identified as very responsible;
- The need for more intensive counselling for youth before termination to address separation issues and fears about living on their own;
- More extensive outreach to other case workers and adolescents in the system who were not currently receiving independent living services;
- Identification of those youth in the system currently not receiving independent living services;
- Further program development for pregnant adolescents; and
- Further development of independent living services within group homes and residential treatment centers.

A state wide task force was developed to identify further program needs and implementation strategies. The task force supported the findings listed above and recommended the following strategies for independent living services.

- The goal of independent living should be established and periodically reviewed for adolescents aged 16-20 in foster care where reunification with their families or adoption appeared unlikely;
- Certain minimum services must be provided for those adolescents assigned the goal of independent living. These included basic skills training in money management, procuring a job, locating an apartment, etc.;
- A community volunteer should be matched with the young adult before he/she leaves care;
- Young adults should receive a package of important personal documents upon discharge;
- A resource manual for independent living should be developed by the task force to disseminate to the district case managers and adolescents in care.

This manual would list applicable community resources and methods of providing independent living services;

- Case managers should be trained in the concept of independent living and its goal, the independent living subsidy program and the resource manual;
- A goal-oriented plan for each foster care youth remaining voluntarily in extended care should be developed;
- The extension of foster care past age 18 should be made available to all foster care youth who might need it;
- All districts should establish community resource networks; and
- Additional creative residential group and foster home services should be available to young adults.

Currently this state is making plans to incorporate many of these recommendations. A resource person has recently been hired in the state office to help design and implement services for adolescents on a state-wide basis. Other plans include the development of resource manuals which include identification of community resources to help workers and administrators throughout the state develop independent living services. Policy is also being drafted which requires a staffing for all sixteen year olds with a goal of independent living or long-term foster care in order to develop specific plans for service provision. The age limit on the subsidy policy has been expanded to include youth over the age of 18.

There are also a few group homes in this state which have incorporated formalized skill training with experiential components into their curriculums. These programs do not provide independent living arrangements for youth, but concentrate on providing progressive amounts of independence and responsibility for the youth.

Finally, this state is also beginning to develop an after care program to provide services to youth who have been discharged from care. The program was not yet developed at the time of the site visit.

5.3 State B

State B is a state supervised, county administered state which has developed general state guidelines for provision of independent living services. Program development is done on an individual county basis. There is therefore a vast difference in independent living program development throughout the state.

In the late 1970's legislation was passed which provided funding for the development of alternative programs. The funding offered an incentive to develop independent living programs. There is also state policy which allows for the provision of independent living subsidies. Again, the counties have incorporated the use of subsidies in different ways. On the average, 100 youth throughout the state receive subsidy payments each month.

During the site visit to State B, three counties were visited. County I had taken a case management approach to the delivery of independent living services. In this county, independent living skills were taught on an individual basis to youth prior to and/or while they were maintaining an independent living arrangement. Youth in foster homes, group homes and in their own homes were also monitored. Plans for each youth were tailored to meet their individual needs. The role of the case manager was to also link up the youth with available community resources. In order to accomplish this task community resources to provide independent living services had been identified and developed. For example, there was coordination with job training programs and programs providing the GED. Personnel in this county have also identified the need for the development of other program components in order to provide a comprehensive service delivery system. Some of these plans include:

- Developing materials to run groups with youth;
- Developing more in-home services;
- Training workers about transition issues youth are facing;
- Contracting for psychodrama treatment to help youths with poor self-images and psycho-social skills;
- Working with foster parents to teach independent living skills;
- Developing "starter packages" for youth being discharged to live on their own (e.g., start up money, dishes, towels, etc.); and

- Developing a program with JTPA to subsidize wages for youth in community job placements.

County II visited in State B has developed an independent living program which includes a twelve week skill training program (usually five youth at a time) and a subsidized living arrangement for approximately three months. A skill training curriculum has been developed. Youth are paid a stipend of $25 for each session they attend. The money is given to the youth upon completion of the training to use for start-up costs for independent living. The curriculum for the skill training program was developed and is implemented by professionals within the county child welfare system. The curriculum basically addresses the resource skills outlined in Chapter 3.

In order to be eligible for the program, a youth must be 17 years old. Youth who are going to school and working part time are given the choice of entering the independent living program. The program is actually targeted for youth who are having a hard time adjusting to their placement; finishing school, etc. Personnel responsible for developing and implementing this program reported that the basic philosophy of the program is to avoid the instinct to "protect" youth. The program curriculum is reality based and youth are given room to make mistakes.

County III contracts with a variety of community agencies to provide independent living programs for youth. Adolescent units serve about 100 youth at a time who are considered to be in an independent living program. These youth include delinquents dependent, and children in need of supervision (CHINS).

The court must approve every case referred to the independent living program. Youth are in a variety of living arrangements including group homes, residential treatment homes, foster homes, etc. Independent living skills training is provided by an agency which contracts with the county. After training most youth enter a subsidized living arrangement or else a plan for self-sufficiency is developed.

This county also provides foster parent training (contracted service) which does emphasize the special needs of adolescents in foster care. All three counties had group home and residential treatment center programs which had incorporated independent living programs. Descriptions of some of these programs are included in the program directory.

5.4 State C

State C had a state administered child welfare program. This state entered into the study acknowledging the fact that there were not many independent living services available throughout the state. There was, however, the concern from the state level to develop services for adolescents. An impetus for the need to develop services came from the youth themselves. This state runs foster care youth conferences in which youth are brought together for a weekend to meet other youth in foster care and provide input about the foster care system. At one of these conferences youth identified the need for being prepared for discharge from foster care, and specifically the need for independent living skills. Specifically the youth at the conference made the following recommendations:

1. Preparation for independent living should begin several years before actual emancipation.
2. Caseworkers should be sensitive to a young person's need to have his self-esteem and confidence supported so that he will feel more optimistic about being a successful adult.
3. Caseworkers and foster parents should assist the young person in setting up goals for the future.
4. Job Corps may be appropriate for some youth, but if this is the only alternative and you flunk out, then you are often left on the streets with no other plans.
5. The State should provide financial assistance to youth planning long range expenses and goals such as college and other educational/vocational programs. In addition, allowances should be increased for teenagers since not all work and have income.
6. Foster parents, caseworkers, and group care staff should assist youth in learning various independent living skills by setting up assemblies (mini sessions) to learn what responsibilities will be faced in the future (e.g., a mock store set up to learn budgeting and money management).
7. The caseworker should recognize the importance of family (as a support system) and assist the youth in getting to know his/her family members and

how to have a better relationship with them before being discharged from the system.

These recommendations highlight the importance of including adolescents in their planning process as well as the role youth conferences can play in providing feedback to child welfare agencies.

There is policy in this state addressing the emancipation needs of youth. It specifies that emancipation planning should occur at least one year before discharge and that the youth, substitute care provider, caseworker, and whenever possible, parent should be involved in developing the plan. The policy also outlines the service activities the plan should reflect (e.g., future living arrangements, feelings about separation, financial support). Finally, the policy states that the plan should make provision for the youth to gradually assume responsibility for independent living skills and outlines these skills. The implementation of this policy was left to the individual counties and caseworkers within the counties.

At the time of the site visit there were not many services or resources available to ensure the implementation of the emancipation plan. A few counties had taken the initiative to develop emancipation programs. These services were mostly available through group homes which had incorporated independent living training components into their programs. Also a contract had recently been awarded for a group home to start an independent living program. The program includes formalized skill training, and experiential learning components. It does not include an opportunity for the youth to live on their own.

This state provided an example of the early resistance caseworkers verbalize when asked to consider new casework responsibilities. To overcome this resistance it helps to provide caseworkers a systematic approach to providing independent living services. There needs to be support and direction provided to them in developing community resources and establishing plans for the adolescents on their caseloads. For example, it may be necessary to assign an individual whose primary responsibility is to identify and access community resources for a county. It may also be helpful to incorporate routine staffings focused on the services needs of adolescents. Finally, the provision of independent living services should be presented as an extension of permanency planning, not as a unique program.

5.5 State D

The final state visited had state supervised, county administered child welfare services. An independent living subsidy was available for youth statewide, however, a minimal number of youth were receiving subsidies because county personnel had indicated they did not believe independent living arrangements were helpful. In most instances youth placed in independent living arrangements had not received skill training prior to the placements.

Youth conferences were also available to adolescents on a statewide basis. These conferences consisted of a weekend retreat for youth to learn independent living skills as well as develop contacts with other youth in foster care. Six weekend sessions were held for 16-18 year old youth in substitute care. During the weekend, group sessions were held to work on specific independent living skills (e.g., budgeting, relationships, apartment hunting). There was also time set aside for formal and informal group recreational activities. Youth were given an opportunity to provide feedback on their substitute care experiences as well as identify the services they felt were necessary to prepare them for living on their own.

The conferences have been very successful and will be held again next year. Many youth expressed a desire for group meetings with other adolescents facing discharge on a more consistent basis. They indicated that they needed more than one weekend of training. In one county the youth actually went back to their caseworkers and asked them to set up group sessions. The youth also reported that the child welfare agencies did not include them in the plans they made for them. For example, one young woman indicated that she had to runaway from a foster home because no one would believe her when she said it was not the right place for her to live. She said running away was the only way to finally get anyone to listen.

In state D, three counties were visited. In all three counties, provision of independent living services were generally handled between the caseworker and the youth. There were no systematic plans or program of services available for the adolescents. At the time of the visits, there did not seem to be a focus on the discharge service needs of adolescents. The thrust of the county programs were designed to provide permanency planning through reunification and/or adoption. For those adolescents who were not going to be reunified or adopted, there was a reliance on the foster parents to help in the preparation of youth. This was occurring with little direction or training from the child welfare agency.

There were some group home programs in two of the three counties which had independent living components. These components included formalized skill training as well as apartment living experiences with twenty-four hour staff supervision. However, very few adolescents were enrolled in these programs.

5.6 Barriers to Implementation of Services

Public agency personnel were also asked to identify the major problems and barriers that confronted them in the development of independent living services/programs. The barriers ranged from implementing a change in the philosophic approach to service delivery to pragmatic implementation issues such as providing transportation for youth to participate in skills training programs. A summary of the barriers identified is presented below.

- A lack of specialized training on the part of caseworkers, program administrators, foster parents and other care providers on adolescent behavior. Specifically, training was needed in how to develop skills in youth to help prepare them for self-sufficiency;

- The need to assess the existing services, assess the specific needs of the youth in the system, and finally develop the services necessary to fill in service gaps. Agency personnel indicated they needed to know where and how to start in order to avoid "putting off" service development. They specifically needed information on what types of services and programs worked;

- The need to identify and access community resources at the state and local level. Caseworkers indicated they often did not have time to develop linkages with community resources. In other instances it was reported that there was limited knowledge of existing resources. Administrators acknowledged a lack of networking with other public agencies (e.g., Department of Education, Job Service) to provide services to youth. In some cases this was due to a lack of initiative while in other instances it was reported that it was difficult to break through "territorial boundaries."

- The lack of financial resources to develop independent living services and specifically independent living arrangements. Since many independent living arrangements were unlicensed facilities, federal funds and in most instances state funds (without a change in state law) could not be used;

- The need for licensing standards for independent living arrangements;
- The need for ideas on how to develop and implement independent living services in rural communities where youth live far apart and resources are not readily available;
- The lack of transportation for youth to partake in training and support groups and other independent living services; and
- The resistance (sometimes from administrators, sometimes from caseworkers) to focus on the needs of adolescents from a self-sufficiency perspective.

The four states visited had approached these barriers through varying degrees of program development for independent living services. Counties in two of the states had taken a systematic approach, incorporating a continuum of services (States A and B). By initiating a systematic approach, service gaps were more readily identified. Also, those states/counties with more of a defined approach to providing services, had established linkages with community resources. This allowed caseworkers to have service options for the youth they were serving.

In the other two states identification, development, and provision of services was generally left to the initiative of individual caseworkers (States C and D). In these states youth did not receive as comprehensive an approach to service delivery. In fact, the youth in these states received fewer services.

Table 5.1 presents the percentage of youth who received at least one independent living service in each study state, and the mean number of different types of services each youth received (the complete listing of services that could be provided is presented in Chapter 6). As is depicted in the table, those states with a comprehensive approach to service delivery provided services to a higher percentage of youth and also provided a broader range of services.

Table 5-1. The percentage of youth receiving at least one service and mean number of services received by youth in each study state.

State	Percent of Youth Receiving at Least One Service	Mean Number of Services Received
State A	60%	6 Services
State B	62%	11 Services
State C	37%	1 Service
State D	55%	3 Services

There appeared to be three key ingredients for developing services for adolescents.

1. A commitment on the part of administration to provide a comprehensive and systematic approach to developing and implementing services;
2. Personnel who had taken the initiative to identify the need for services and who were then given the opportunity to concentrate on developing and implementing the services; and
3. Identification of funding sources which were specifically targeted for developing independent living services.

Chapter 6 will provide further discussion about the adolescents who received independent living services and their adaptation to independent living once they were discharged from care.

6. THE ADOLESCENTS

Case record abstracts were completed for a sample of adolescents who had been discharged from care in each of the study states. The purpose of the abstracts was to obtain information on the demographic and case history characteristics of adolescents discharged from substitute care and to identify how these characteristics may or may not affect the receipt of independent living services. (A complete set of frequency tables on data from the abstract forms is presented in Appendix A.

This chapter summarizes the findings from the case record abstracts, and highlights the important relationships that were and the implications of these relationships in connection with the study's objectives. Details of the analyses and statistical calculations can be found in Appendix C.

Two limitations of the study data must be considered in applying the findings.

1. The four states were purposively selected to provide information on the wide range of independent living services/programs available. Counties within these states were also purposively selected to ensure inclusion of youth who had received services. Therefore the study findings are not generalizable beyond the study counties. The findings can be used however to explore the issues and questions that need to be addressed in developing independent living services within other states.
2. The study was limited to obtaining historic information on the adolescents through their case records. Therefore, outcome data on adaptation after discharge was limited.
3. Additional exploratory discussions were conducted with a small, non-random sample of 20 adolescents.

This chapter is divided into four sections. The first section presents a description of the demographic and case history characteristics of adolescents discharged from care in the four study states. Section Two presents a discussion of the experiences and training (e.g., jobs held, independent living services, independent living arrangements, education levels) youth acquired by the time they faced discharge from substitute care. A description of how demographic and case characteristics influenced whether or not youth received independent living services is provided in Section Three. Section Four summarizes the information obtained through the informal discussions that were held with adolescents who had been discharged from care.

6.1 Demographic and Case History Characteristics

6.1.1 Demographic Characteristics

The percentage distribution by sex, race, age and handicap status of the sample population is presented in Table 6-1. The sample was 55 percent male. The mean age of the youth in the sample was 18 years of age. Thirty-five percent of the youth who were discharged were under 18. Generally, the youth under 18 were discharged because they were returning home or on runaway status, and not because they were being emancipated. Minority children were slightly older than nonminority children, on the average. (Mean age of 18.4 for minority children as compared to a mean age of 17.8 for nonminority children.)

Forty-four percent of the youth had handicaps, with emotional disturbance cited as the most prevalent handicap (30% of the youth).

6.1.2 Case History Characteristics

Table 6-2 provides the percentage distribution by months in care, number of substitute care placements, number of living arrangements, and number of runaway episodes for the adolescents studied. The average length of time the adolescents spent in care was five years. But a majority (54%) of the adolescents were in care for three years or less. This finding indicates that half of the adolescents entered care as adolescents (at least by 13 years of age). The majority of the adolescents studied had only one episode in substitute care (85%). For purposes of this study a substitute care episode was defined as each new entry a youth had into care. A new entry was only counted if the youth re-entered foster care after having been formally discharged from care with the intent of permanently placing the youth in an in-home living arrangement.

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Table 6-1. Distribution of sex, race, age, and handicaps for youth discharged from care in the four study states*

Sex	Percentage Distribution
Male	55%
Female	45%
Total	100%
N	302
Race	
White, not Hispanic	67%
Black, not Hispanic	23%
Hispanic	6%
Asian or Pacific Islander	1%
American Indian/Alaskan Native	1%
Biracial	2%
Total	100%
N	296
Age	
16	10%
17	25%
18	38%
19	15%
20	5%
21	7%
Total	100%
N	303
Mean	18 years old
Handicapped	
Yes	44%
No	56%
Total	100%
N	297

*N's vary based on missing information within each category.

Table 6-2. Distribution of total months in substitute care, number of placements, number of living arrangements, and number of runaway episodes for youth discharged from care in the four study states*

Months in substitute care	Percentage Distribution
0-11 months	16%
12-36 months	38%
37-60 months	14%
61-120 months	15%
Over 120 months	17%
Total	100%
N	299
Mean	60 months

Number of substitute care episodes	
1	85%
2	12%
3	3%
Total	100%
N	305
Mean	1

Number of living arrangements	
1	18%
2-3	42%
4-6	27%
Over 6	13%
Total	100%
N	304
Mean	4

Number of runaway episodes	
0	52%
1-2	28%
3-6	15%
Over 6	5%
Total	100%
N	257
Mean	2

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*N's vary based on missing information within each category.

The adolescents averaged four different living arrangements during their substitute care episodes, with 60 percent of the youth experiencing three or less different arrangements. (These living arrangements include independent living arrangements but do not include runaway episodes.)

Forty-eight percent of the adolescents had at least one runaway episode while in substitute care. Table 6-3 provides a further breakdown of runaway episodes by age. A negative correlation was found between age and runaway episodes. Younger adolescents (16 and 17) were more likely to have had one or more runaway episodes than 18 to 21 year olds. As the number of runaways was totaled over the youth's entire substitute care experience, these findings do not necessarily indicate that younger adolescents are more likely to runaway. If this were true then the 18-21 year old youths could have accumulated runaway episodes during their earlier years in care. The finding does raise some interesting questions. First of all, is there a current rise in runaway episodes? Staff in two of the states visited indicated they were seeing a rise in runaways. The finding may also be due to a biased sample. Perhaps the 16 and 17 year olds discharged from care include a higher proportion of adolescents who have run away. Conversely, the older youth in care may not include those youth who ran away at younger ages. Also, changes in agency policy may be affecting the findings about runaways. As this was not a study about runaways, the sample design and type of information collected did not permit a more conclusive explanation as to why there was a negative correlation between age and number of runaway episodes. However, the finding does warrant further investigation into the factors which underlie this relationship.

Three of the four states visited include independent living as a case plan goal option. The distribution of the initial case plan goals for the study population are presented in Table 6-4. As is seen in the table, nine percent of the youth had an initial case plan goal of independent living. The majority of the youth (61%) had the goal of returning home or returning to the home of a relative. However, 65 percent of these youth had remained in care until they were 18 years of age or older.

Table 6-3. Distribution by age of adolescents and by whether or not they had runaway episodes while in substitute care

	Runaway episodes	
Age	0	1 or more
16	7%	16%
17	20%	28%
18	41%	37%
19	17%	11%
20	5%	3%
21	10%	4%
Total	100%	100%
N	132	123

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Table 6-4. Distribution of initial case plan goals

Initial Case Plan Goals	Percentage Distribution
Return home	49%
Place with parent, relative, or other caretaker with whom youth had not resided prior to substitute care	12%
Place in nonfinalized adoptive home	2%
Place in finalized adoptive home	<1%
Independent living	9%
Long term substitute care	21%
No goal established	7%
Total	100%
N	291

A discussion of how these demographic and case history characteristics are related to the provision of independent living services is found in Section 6.3.

6.2 Adolescent Skill and Experience Levels Prior to Discharge

As discussed earlier, there are many skills and experiences which must be acquired in order to become self-sufficient. These include both tangible and intangible skills. Information collected through the case record abstracts did allow an examination of the skill and experience levels obtained by the adolescents in the following areas:

- Level of education obtained;
- Job experiences;
- Independent living arrangements;
- Independent living training; and
- Contact with parents before discharge.

Level of Education. Only 28 percent of the adolescents studied had completed high school at the time of discharge. Table 6-5 presents the distribution of adolescents by the level of education completed. A further breakdown by age and education level is provided in Table 6-6. Only 34 percent of the 18 year olds discharged from care had completed high school or more. As would be expected, there was a significant relationship between age and education level. A higher proportion of older youth (19-21 year olds) finished high school or more before discharge. Most state policies require that in order for youth to remain in care past the age of 18, they must be enrolled in an education or vocational program. Therefore, it would be expected that the 19-21 year olds would have completed more schooling.

Previous studies have also shown that youth in substitute care have educational problems. For example, the study conducted by the Citizens Committee for Children of New York, The Foster Care Exit Ready or Not, found that youth who were facing discharge from substitute care with the goal of independent living had serious reading deficits. Twenty-four percent of these youth were also below age appropriate grade level.[1]

Trudy Festinger's study, No One Ever Asked Us: A Postscript for Foster Care drew comparisons between the outcomes for ex-foster children she studied and the norms of the general New York City population. She found that educational achievement was one area in which these two populations greatly differed. This was especially true for males, who completed college at a rae of 2.3 percent of the former foster children compared to 22.1 percent of the New York City population.[2]

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[1] The Citizens Committee for Children of New York, Inc., The Foster Care Exit Ready or Not, September, 1984.

[2] Festinger, T., No One Ever Asked Us: A Postscript for Foster Care (New York: Columbia University Press, 1983).

Table 6-5. Distribution of adolescents who finished some high school, or had some/completed college at the time of discharge

Education level completed	Percent
Some high school or less	67%
Completed high school/GED	28%
Some/completed college	4%
Total	100%
N	257

Table 6-6. Distribution of age by level of education completed at time of discharge from care

	Education Level Completed at Time of Discharge				
Age	Some high school or less	High school/ GED	Some/compl. college	Total	N
16	96%	4%	--	100%	24
17	89%	10%	2%	100%	63
18	66%	30%	4%	100%	106
19	49%	42%	9%	100%	33
20	36%	65%	--	100%	14
21	24%	53%	24%	100%	17

The findings of all four studies indicate a need for the education provided to youth in substitute care to be examined. In particular, the following questions need to be considered by child welfare professionals:

1. What are the reasons youth in substitute care are not completing high school before being discharged?
2. If youth in care have lower reading levels, emotional problems hindering their ability to learn, learning disabilities, etc; what is the responsibility of the child welfare agency to advocate for these youth in the public education system?
3. Should youth be encouraged to remain in care past age 18 in order to facilitate completion of high school before discharge?

Job Experiences. Information on job experiences was only available for 192 youth (63% of the sample). Of these 192 youth, 62% held a job while in care. The relationship between having a job while in care and adolescents' education level was also examined. It was found that adolescents who held a job while in care had also completed more education than youth who had not been employed in care. (See Table 6-7.) As discussed earlier, it was also found that the education level obtained was dependent upon age level. These findings are not surprising. In fact they are validated by common sense and practical experience. The implications of these findings emphasize the importance of obtaining an education in order to have a job. They provide further evidence that child welfare agencies must help adolescents in care to finish high school in order to help ensure their adaptation to independent living.

Table 6-7. Job status of youth in relation to education level achieved at time of discharge

Education level obtained at time of discharge	Job Status	
	Job Held	No Job Held
Some high school or less	53%	79%
Completed high school/GED	38%	21%
Some/completed college	9%	0
Total	100%	100%
N	108	61

Independent Living Arrangements. Although three of the four states studied had policies which allowed youth to live on their own while still in the care and custody of the child welfare agency, only 15 percent of the studied adolescents had been provided this experience before being discharged from care, and the majority of these youth came from one state. As discussed earlier, this experience is an important component of the continuum of services that adolescents need before discharge from care.

Independent Living Services. Case records were reviewed to ascertain whether or not the sampled youth had received from one to 18 different independent living services. The most prevalent service received was psychological counselling (45%). Information on the extent or quality of the counselling services was not available through the case record. Therefore, receipt of this service could range from diagnostic testing to psychological counselling over an extended period of time.

Only four other services were provided to at least 35 percent of the youth. These included information about relationships and social skills (39%), job search information (39%), sex and birth control information (37%), and budgeting skills (35%).

As was discussed in Chapter 5, the number of different services received by a youth was dependent upon the state in which the youth resided. Those youth from the two states with established county-wide programs were provided more services than the two states

Table 6-8. Percentage of youth receiving specific independent living services by site

Independent Living Service	Site				Total
	01	02	03	04	
Relationship and social skills	41%	66%	11%	35%	39%
Alcohol and drug information	33%	66%	11%	22%	34%
Health care information	35%	66%	9%	17%	33%
Health insurance information	32%	66%	3%	7%	29%
Sex and Birth control info	38%	66%	15%	22%	37%
Psychological counselling	51%	68%	23%	33%	45%
Nutrition information	29%	66%	6%	8%	29%
Job Search information	38%	66%	18%	30%	39%
On the job training	29%	58%	6%	17%	29%
Job training - classroom	32%	59%	3%	18%	30%
Budgeting skills	35%	66%	6%	30%	35%
Credit information	28%	66%	3%	8%	28%
Car insurance information	33%	66%	6%	8%	30%
Community resource information	33%	66%	6%	15%	32%
Food preparation skills	33%	65%	3%	15%	31%
Housing information	35%	66%	8%	13%	32%
Housekeeping skills	36%	65%	5%	17%	32%
Shopping skills	36%	66%	3%	12%	31%
Total*	*	*	*	*	*
N	78	74	65	60	277
Mean # of services	6	11	1	3	

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*Total for each column is greater than 100% because youth may have received more than one service.

which did not have established programs (11 and 6 services vs. 3 and 1 service, respectively). Table 6-8 provides a breakdown of the percentage of youth receiving each type of service, by state.

Parental Visitation. Fifty-three percent of the mothers and 72 percent of the fathers did not visit the studied youth during their last year in substitute care. Table 6-9 presents the percentage distribution of visitation by mothers and fathers. A further discussion on the impact of parental visitation on receipt of independent living services is provided in Section 6.3.

Table 6-9. Distribution of mothers' and fathers' visits during the adolescents' last year in substitute care.

Amount of Visitation	Percentage Distribution	
	Mother	Father
None	53%	72%
Less than once a month	16%	14%
1 or 2 times per month	18%	8%
3 or 4 times per month	7%	3%
More than once a week	2%	1%
Physically unable to visit	4%	2%
Total	100%	100%
N	211	199

6.3 Characteristics Which Predict Receipt of Independent Living Services

Analyses were conducted to ascertain whether specific demographic and case history characteristics predicted receipt of independent living services. The characteristics examined included:

- Age;
- Sex;

- Minority status;
- Handicap status;
- Job status;
- Education level;
- Number of runaway episodes while in care;
- Number of placements in substitute care;
- Number of living arrangements while in care;
- Number of months spent in substitute care;
- Visitation by mother/father during the last year of care;
- Recommendation from last periodic review;
- Agency recommendation for dispositional hearing; and
- Recommendation/decision from last dispositional hearing.

The case record abstract outlined a list of 18 different services that could have been provided to a youth while in care. These included independent living arrangements, job training, basic skills training, etc. In assessing the impact of the demographic and case history characteristics, a youth was considered to have received services if she/he had received any one of the possible 18 services or had been in an independent living arrangement.

In order to determine if the effects of adolescent characteristics were unique to certain categories of services rather than general receipt of services, the 18 independent living services were divided into four categories. These categories were:

- Personal and health related services, (relationship and social skills, alcohol and drug abuse, health care, health insurance, sex and birth control, and nutrition);
- Employment related services (finding a job, on the job training, and classroom instruction job training);
- Daily living skills, (food preparation, how to find a place to live, housekeeping, and shopping); and

- Financial and community services, (training in budgeting, use of credit, car insurance, and community services).

If a particular adolescent characteristic was related to general receipt of services, further analyses were conducted to see if the receipt of services was influenced by one of the four categories of services.

The following discussion of findings identified those characteristics which predicted whether or not an adolescent received independent living services in general. If overall receipt of services was influenced by a particular category of services, this will also be noted.

6.3.1 Overall Impact of Demographic and Case History Characteristics

Six of the 14 demographic and case history characteristics were related to the receipt of independent living services. These relationships are described below.

Sex. Female adolescents were more likely to receive independent living services than males. Sixty-three percent of the females versus 51 percent of the males studied received independent living services (see Table 6-10). When independent living services were broken into categories we found that the category, personal and health related services was the only category in which this relationship occurred. Sex was not a predictor of the receipt of financial and community services, daily living skills training, or employment training.

Disabling conditions. Sixty-five percent of the adolescents with handicaps as compared to 52 percent of the adolescents without handicaps received independent living services (see Table 6-11). It appears that agencies were targeting independent living services to those adolescents with identified problems. Once again this relationship was influenced by the receipt of personal and health related services.

Visitation by Mother and Father. The more often mothers visited their adolescents in care, the more likely the adolescent would receive independent living services. As is presented in Table 6-12, the percent of adolescents receiving independent living services increases as the number of mothers' visits increases. Sixty-nine percent of the youth visited

Table 6-10. Relationship between sex and receipt of independent living services

Independent Living Services	Sex Male	 Female
Received services	51%	63%
Did not receive services	49%	36%
Total	100%	100%
N	158	132

Table 6-11. Relationships between whether or not adolescents were handicapped and receipt of independent living services

Independent Living Services	Handicapped Yes	 No
Received services	65%	52%
Did not receive services	35%	48%
Total	100%	100%
N	124	161

Table 6-12. Relationship between frequency of mother's visitations during last year of care and receipt of independent living services

Independent Living Services	Number of Visitations by Mother		
	Not at all	Less than once a month	Once a month or more
Received services	51%	69%	70%
Did not receive services	49%	31%	30%
Total	100%	100%	100%
N	117	32	54

Table 6-13. Relationship between frequency of father's visitation during last year of care and receipt of independent living services

Independent Living Services	Number of Visitations by Father		
	Not at all	Less than once a month	Once a month or more
Received services	58%	84%	55%
Did not receive services	42%	16%	45%
Total	100%	100%	100%
N	146	25	22

once a month and 70 percent of the youth visited once a month or more received independent living services as compared to only 51 percent of the youth receiving services when there was no visitation at all. The relationship between the frequency of fathers' visits and receipt of independent living services was not as clear. Those youth who were not visited by their fathers were more likely to receive services than those youth visited by their fathers once a month or more (58% and 55%, respectively). However, 84 percent of those youth who were visited by their fathers less than once a month were more likely to receive independent living services (see Table 6-13), and specifically personal and health-related services.

Parental visitation impacted the provision of independent living services. Although the study findings do not provide the reasons for this relationship, it can be speculated that parental involvement causes agencies to pay more attention to the youth they are serving. It may be that these parents act as advocates for their children or that their involvement merely brings youths' service needs to the attention of their caseworkers. In either case, this finding raises many questions. First, what is the role parents can play in these youths' lives after discharge from substitute care? Are child welfare agencies using parental resources to their fullest potential? Finally, what type of preparation for independence are adolescents who do not have a parent resource receiving?

Total Months in Care. Table 6-14 presents the distribution of youth receiving services as compared to those not receiving services for various amounts of time spent in substitute care. A marginal relationship was found between youth in care under one year or from three to ten years and receipt of independent living services. The youth in these time categories were more likely to receive services than not receive services. This was particularly true of youth in care five to ten years. Months in care was related to all four categories of independent living services.

Total number of living arrangements. The more living arrangements adolescents had in care the more likely they were to receive independent living services. Thirty-five percent of the youth with one living arrangements as compared to 66 percent of the youth with more than six different living arrangements received independent living services (see Table 6-15). The total number of living arrangements was related to receipt of all four categories of independent living services.

Table 6-14. Relationship between total months in care and receipt of independent living services

Independent Living Services	Total Months in Care 0-11 mo.	12-36 mo.	37-60 mo.	61-120 mo.	Over 120 mo.
Received services	59%	50%	59%	75%	54%
Did not receive services	41%	50%	41%	25%	46%
Total	100%	100%	100%	100%	100%
N	45	112	41	43	46

Table 6-15. Relationship between total number of living arrangements and receipt of independent living services

Independent Living Services	Total Number of Living Arrangements 1	2-3	4-6	Over 6
Received services	35%	59%	60%	66%
Did not receive services	65%	41%	40%	34%
Total	100%	100%	100%	100%
N	54	118	63	56

Results of review decisions and recommendations. Tables 6-16 through 6-18 present the relationship between the recommendation from the most recent periodic review, the agency recommendation for the most recent dispositional hearing and the decision from the most recent dispositional hearing and receipt of independent living services. In each instance those youth who had received the recommendation of independent living in the community were more likely to have received independent living services. This finding also occurred for all four categories of independent living services. We do not know whether the receipt of the services prompted the decisions or the decisions prompted the provision of services. In either case it is important that the review process encourage the provision of independent living services. The finding also indicates that services are being provided to those youth who will be discharged to living on their own. This raises the question about provision of services to youth who have not been identified as having to live on their own by the agency or court, but who may very well find themselves on their own at the age of 18. What happens to the youth with a goal of long-term foster care when they are discharged from care? If the recommendation for a youth is to return home, does this mean that it will actually happen? These issues need to be considered by agencies, review panels and court systems when they are reviewing adolescent cases.

6.4 Adolescent's Recommendations

Informal discussions were held with adolescents who had been discharged from substitute care. The youth we spoke with were those who agency personnel could easily contact and were also willing to share their foster care and transition experiences. Therefore, the majority of the youth we spoke with were "survivors" who were finding ways to adapt to living on their own. These youth were able to provide a unique perspective on their foster care experiences, services which had and had not been provided to them, preparation that they felt was critical for adapting to living on one's own, and the successes and problems they were encountering now that they were living on their own.

Foster care experience. The youth were divided in their reactions to their foster care experiences. Some youth were very positive about their foster parents and had even arranged to live with them after discharged from care. Other youth expressed contempt for the

Table 6-16. Relationship between the recommendation from most recent periodic review and receipt of independent living services

	Review Recommendation				
Independent Living Services	Reunification parent/relative	Adoption	Ind. Living	Remain in foster care	Other
Received services	55%	--	74%	46%	54%
Did not receive services	45%	100%	26%	55%	66%
Total	100%	100%	100%	100%	100%
N	62	1	101	66	24

Table 6-17. Relationship between the agency recommendation for most recent dispositional hearing and receipt of independent living services

	Agency Recommendation				
Independent Living Services	Reunification parent/relative	Adoption	Ind. Living	Remain in foster care	Other
Received services	43%	--	71%	59%	52%
Did not receive services	57%	100%	29%	41%	48%
Total	100%	100%	100%	100%	100%
N	51	2	79	63	48

Table 6-18. Relationship between the decision/recommendation from most recent dispositional hearing and receipt of independent living services

		Dispositional Hearing Recommendation			
Independent Living Services	Reunification parent/relative	Adoption	Ind. Living	Remain in foster care	Other
Received services	52%	--	71%	56%	53%
Did not receive services	48%	100%	29%	43%	47%
Total	100%	100%	100%	100%	100%
N	58	3	69	62	47

foster care situations in which they had lived. These dissatisfied youth related a variety of stories including sexual abuse in the foster home, having to eat at separate tables from the foster family, to having to bathe in the same water as three other foster children.

The main recommendation from these youth was that foster children be included in the placement decisions being made for them. They also suggested that foster families and foster children be more appropriately "matched". As one youth stated, "Some homes are more structured and some of us need more structure. However, if you place one of us who needs some flexibility in a home that is very structured, it will not work." One youth also indicated that agencies need to make more of a concerted effort to help youth maintain close ties with their families.

The youth we spoke with were divided between those who had experienced independent living programs and those who did not. Those youth who had been in independent living programs identified the following services as very beneficial to their transition to independent living.

- The relationships they were able to develop with their caseworkers. Youth indicated that for the first time in their foster care experience there was an identified caseworker who took the time to include them in the planning process as well as provide the encouragement necessary to help them make the transition to living on their own. These youth could not stop emphasizing how important it was to have a person you could talk to about your daily experiences and fears about the future;
- The experience of being able to live in their own apartment, while there was still agency supervision. Those youth who had experienced independent living arrangements said they could never have lived on their own if they had not had the experience while still in foster care. One youth stated that agency supervision while in your own apartment "helps to keep you out of trouble."
- The identification of a volunteer to provide support while in care as well as after discharge from care;
- The skills training in budgeting, locating an apartment, finding a job, etc; and
- The start up money they were provided upon discharge from care.

The youth interviewed also identified services which they felt were not adequately provided to them while in care. These services included:

- Tools for dealing with family problems;
- Preparation for the loneliness and fears that will be felt once discharged from care;
- Family planning;
- Information about obtaining health care and health insurance;
- How to say "no" and cope with the freedom you are suddenly confronted with;
- Counselling groups to deal with their emotional problems;
- Foster parents and caseworkers who understand their needs and provided adequate support;
- Living situations which allowed them to make their own decisions and mistakes;
- Daily living skills including budgeting, job hunting, etc. and
- Information and help obtaining a driver's license.

The youth who identified these service needs were primarily those who had not been placed in one of the county-wide independent living programs. However, some of the youth in the county programs did indicate that the preparation they received was helpful, but it was for too short a time period.

Critical skills and resources needed for living on your own. The critical skills and resources identified by youth were very similar to the services they indicated were necessary to have. These included:

- Daily living skills;
- Coping skills for the loneliness that will be felt;
- People you can rely on for encouragement and support;
- Being able to access transportation and get a drivers license;

- Knowing how to get health care services;
- Knowing how to obtain and maintain a job; and
- Finishing high school.

Every youth we spoke with identified finishing high school as being critical to being able to live on your own. They all had stories about friends who had not finished high school and were currently in the streets "strung out", or unable to find a job.

Adaptation. The youth interviewed came from a variety of family situations. One young woman came into care as a teenager after she brought her mother to the attention of the authorities for being abusive and neglectful. Other youth had grown up in care. Sexual abuse incidents were prevalent among the young women interviewed. Each of the youth had come from situations which had negative effects on their emotional development. Yet, they also possessed an inner strength that kept them moving ahead. Many of the youth expressed this through their survival behavior. Others told us that "you had to take care of yourself, because there was no one else out there to provide for you." In all of these instances, there was also a sadness that came through. It was almost as if the youth had to learn how to survive by pulling into themselves and approaching life with a clenched fist.

The youth were currently in living arrangements that ranged from living with their foster parents (some were paying rent to them) to living with friends or relatives. Three of the young women were married and had children. Although the youth appeared to find a peer support network, many of the young women had got themselves into situations where they had been emotionally and financially abused through "love" relationships.

Of all the youth we spoke to, about one-fourth had themselves on an employment/education track that would eventually lead to jobs which paid more than minimum wage. As discussed earlier, all of the youth were adamant about the importance of completing high school.

The youth indicated that it was very easy to get themselves into financial trouble. Money management was a skill that they did not feel they had conquered. Also, most of the youth had not seen a doctor or dentist since they left substitute care. In some instances this was as long as three years. The reason given for this was that they did not have the money, and in most cases were not in the types of jobs which provided health insurance coverage.

Adaptation for these youth was a struggle. Most of them indicated that more preparation would have helped them understand and conquer the hurdles they faced.

6.5 Overview

The sampled youth discharged from care faced living on their own with minimal amounts of experience and training. First, only 34 percent of the 18 year olds discharged from care had completed high school.

Second, independent living services had been provided to less than half of the youth discharged. This finding includes those adolescents who may have received just one service (e.g., information about alcohol and drug abuse) and therefore does not mean that these youth were provided comprehensive preparation. Also, a concerted effort was made to bring adolescents into this study who had received services. Third, 53 percent of the mothers and 72 percent of the fathers did not visit the studied youth during their last year of care. Family support for these youth was minimal.

Fourth, only 15 percent of the adolescents had experienced an independent living arrangement before being discharged from care. Finally, 62 percent of the youth had held a job before being discharged from care.

It was also found that various demographic and case history characteristics predicted the receipt of independent living services.

Females were more likely to receive independent living services, particularly personal and health related services. Disabled youth were more likely to receive independent living services, again personal and health related services.

Youth who had more parental visitation during their last year of care were also more likely to have received personal and health related independent living services.

The total months youth spent in care (especially those who spent between 3 and 5 years) was related to their receipt of all categories of independent services. The more living arrangements a youth experienced, the more likely he/she would receive services.

Finally, the recommendations/decisions from periodic reviews, agencies, and dispositional hearings for independent living in the community was related to the receipt of all categories of independent living services.

7. CONCLUSION

The Study of Independent Living Services for Youth in Substitute Care was designed to provide an overview of state policies, programs and services currently being developed to prepare youth for independent living. It also explored the experiences and resources available to adolescents leaving care in four states. Finally, demographic and case history characteristics that were related to the receipt of independent living services were identified. Discussed in this chapter are the major conclusions reached in response to the detailed study findings presented in the preceding chapters. First, a summary of the findings will be presented.

7.1 Summary of Findings

Policies, programs and services. States are making substantial efforts to develop services to meet the needs of adolescents who will be discharged from care to live on their own. Policies are being implemented which outline the preparation that adolescents must receive before discharge (25 states currently have policies which require and/or support independent living services and 28 states are in the process of revising or developing policies). Programs and policies to provide subsidies to youth for practice living arrangements while still in agency custody are being incorporated into existing substitute care programs (27 states). Basic skills training courses are being provided through caseworkers, contracted service providers, group homes and residential treatment centers (RTC's). A number of RTC's and group homes are incorporating experiential independent living components into their programs. The recognition of the importance and value of preparing youth for self-sufficiency exists. The desire to develop the necessary services to promote a more successful transition for youth being discharged from care has been expressed by program administrators and caseworkers. The service gap has been identified, but a systematic and comprehensive approach to providing services for this population is not always being pursued. Currently, not one of the states studied has a comprehensive service delivery system to meet the permanency planning needs of its adolescents. States are incorporating programs which are reaching limited numbers of youth. These programs are generally addressing only one phase of the service continuum. For example, independent living arrangement policies are being developed without providing youth the skill training necessary to practice living on their own. States are asking for direction in how to define, design and implement these services into the current service delivery system in order to meet the needs of a greater number of youth facing discharge.

Demographic and case history characteristics of studied youth. The number of adolescents in care ranged from one-third to one-half of the study states' substitute care caseloads. Half of the youth had entered care as adolescents, with five years being the average amount of time youth spent in care. Thus, there is a diversity in the adolescent population in care between youth who have grown up in care and those who are entering as adolescents. Forty-four percent of the studied youth had identified handicaps, with emotional disturbance cited as the most prevalent handicap (30%). Almost one-half of the youth had at least one runaway episode while in substitute care.

The experiences and resources youth have at the time of discharge. Information collected through the case records of the study population allowed an examination of the experiences and resources youth had available to them in the following areas: level of education obtained, job experiences while in care, the opportunity to experience an independent living arrangement, the types of independent living services provided, and the amount of contact with parents before discharge.

It was found that only 34 percent of the 18 year olds discharged from care had completed high school. Youth discharged from care who were over 18 did finish high school more often (51% of the 19 year olds, 65% of the 20 year olds, and 77% of the 21 year olds). This was expected since youth remaining in care after age 18 were generally there to finish schooling.

The average number of independent living services received by youth was five. However, the average number of services ranged from one to 11 services, depending on whether the youth was from a state which had more defined independent living programs or generally left development and provision of services to individual caseworkers. As would be expected, the two states which had more defined programs provided more services to youth (6 and 11 services as compared to 1 and 3 services from the states without defined programs).

The service provided to the greatest percentage of youth was psychological counselling (45%). Only four other services were provided to at least 35 percent of the youth. These included information about relationship and social skills (39%), job search information (39%), sex and birth control information (37%), and budgeting skills (35%). The extent to which information was provided for each of these services was not delineated on the case record abstract. Therefore, we were not able to examine the thoroughness of service provision, only whether or not there was indication in the case record that the youth had received the service.

Only 47 percent of the mothers and 28 percent of the fathers had visited the youth during their last year in care. This finding exemplifies the lack of social supports, particularly parental support youth have at the time of discharge.

Youth in care were also discharged with minimal experience in living on their own (15% had experienced independent living arrangements). This creates a situation in which many youth have to experience living on their own without any prior practice. For many youth this lack of preparation also included lack of training in basic living skills, no high school diploma, or lack of a support system to turn to once they were discharged.

One service area in which youth were provided the most experience before discharge was employment (62% of the youth had at least one job while in care). Many of the caseworkers interviewed stated that it was not difficult to help youth find a job, but it was difficult for the youth to maintain a job. The youth might be fired because they would consistently show up late or have trouble taking instruction. In other instances the youth would quit, contending "the job was boring, did not pay enough money, or expected too much from them." Caseworkers indicated that they did not have the appropriate training to provide job counseling and they felt that other resources needed to be used to provide this service to youth. The states which appeared to have the best employment rates for youth were those in which the agencies made use of job service programs and the Joint Training Partnership Act (JTPA) services.

It was also found that receipt of independent living services was related to certain demographic and case history characteristics. Females and disabled youth were more likely to receive independent living services, particularly personal and health related services. Those youth who had received more visitation by their parents were also more likely to have received personal and health related services. Other characteristics which were related to the receipt of independent living services included the total number of months youth spent in care (those in care 3 to 5 years were more likely to receive services), the number of living arrangements experienced by youth (youth with more arrangements were more likely to receive services) and the decisions/recommendations made by periodic reviews and dispositional hearings. Youth who had received a recommendation of independent living from these reviews were more likely to receive services.

The study did not find any relationship between receipt of independent living services and minority status, education level, age, or whether or not a youth had a job while in care. We were particularly surprised by the lack of relationship between receipt of services and minority status since professionals in the field have raised concern about the lack of services available for minority youth in care. This study finding may be the result of the particular states studied. The two states which provided the most extensive services to youth had lower minority populations (22% and 21%, respectively), while the two states which provided the fewest services to youth had much higher minority populations (39% and 53%, respectively).

7.2 Conclusions and Recommendations

The study findings have highlighted the need to focus more attention on the delivery of services to adolescents in substitute care, specifically services to help promote a successful transition to self-sufficiency.

In order for a young person to be successful when they are on their own, there are a variety of resource skills, functional skills and attributes they must require (e.g., budgeting, decision making, self-esteem). In reality, one begins to acquire these skills at a very early age and continues to redefine them throughout one's lifetime. It makes sense then, to view preparation for independent living not as a singular event, but as a series of events that occur along a continuum. This study provided a programmatic framework for the provision of independent living services. It included four phases, (1) informal training, (2) formalized training, (3) practice living arrangements, and (4) self-sufficiency (after care). As presented in earlier chapters, the continuum of independent living services is not a discrete program for 16-

18 year olds, but a process which allows for the developmental stages of all youth in substitute care to be met in order to prepare them for self-sufficiency.

The purpose of this study was to identify the needs and available services of youth being discharged from care to living on their own. By focusing on the end of the foster care delivery system, it became apparent that youth being discharged from care frequently did not have the skills to become self-sufficient adults. One of the reasons for this situation was the nature of the foster care system itself. Substitute care services were originally developed to provide a protective environment for youth coming from abused, neglected, and abandoned situations. A major focus of the system was to meet the dependency and security needs of these children. However, this process has sometimes neglected the need to balance the growth and self-sufficiency needs of youth with their dependency needs.

Also, foster care services have been focused on preventing foster care placement, and finding permanent living arrangements for youth who have been placed in foster care (e.g., return home, adoption). Although this emphasis has been critical to curtailing foster care drift, in some instances it has narrowed the scope of permanency planning to a type of living arrangement. This can become particularly detrimental to adolescents in foster care for whom return home or adoption are not always viable alternatives. Currently, approximately 40% of the foster care population is adolescents, and the majority of these youth will not be reunified with their families or adopted.

By regarding independent living services as a continuum, the process can be implemented for all youth, regardless of their case plan goal because it does not limit the definition of permanency planning to a type of living arrangement. Instead, it focuses on the long range needs of all youth in care, no matter what their future living arrangement will be.

Broadening the concept of permanency planning to incorporate independent living skills training will involve the redefining of certain service delivery components and the expansion of some resources. It does not mean the development of a new delivery system. A viable resource to help prepare youth for independent living is the informal training that can occur in the youth's current living arrangement, whether it be a foster home, group home, or residential treatment center (phase one of the continuum).

In this way self-sufficiency training can be provided to youth throughout their foster care experience. Agencies can develop guidelines which outline the expectation of caregivers to provide opportunities for youth in their residence to problem solve, make decisions, be involved in planning and preparing meals, and so on. In many instances this will involve broadening caregivers understanding of the developmental needs of youth, and specifically the developmental lags that foster care youth might be experiencing. This changing role for caregivers would require specialized training and technical assistance. It would not eliminate the need for other resources to help teenagers acquire some of the specialized skills needed for self-sufficiency. However, it does allow for the preparation of youth to be incorporated throughout the foster care delivery system and not just when youth are facing discharge.

Public and private agency professionals repeatedly indicated that independent living skills needed to begin before the age of 16 or 17. Viewing the provision of services as a continuum of skills to be acquired throughout the foster care experience addresses this concern.

Resource expansion can also be accomplished through networking with existing community public and private resources. One particular area where there appears to be a need for further coordination is between the public school system and the child welfare system. As described earlier, less than half of the 18 year olds discharged from foster care left without a high school education. Also, schools have the capability of providing services to youth that the foster care system may not be able to provide (e.g., job training programs, basic skills training).

The lack of contact youth had with their natural parents during their last year of care exemplifies the lack of social supports, particularly parental support, youth have at the time of discharge. Yet, the first place many youth want to go once they are discharged from care is back to their families. In order for youth to continue with their own lives and to develop intimate relationships, they need to understand the dynamics of their own family relationships, and the past rejections they experienced. Therefore, child welfare agencies may need to consider helping youth to deal with family/social support issues before discharging them from care.

Child welfare professionals indicated that they needed further information about the effectiveness of independent living services that are currently being used. There is a need for evaluations to be done on the types of independent living services that are most useful to adolescents' transition to independence. Child welfare agencies have also requested assessment tools to identify the specific service needs of their foster care populations.

With the advent of P.L. 99-272, the Budget Reconciliation Act, funds for developing independent living services to adolescents will be made available to the states for fiscal years 1987 and 1988. This funding provides the vehicle for the federal government to help support state initiatives for independent living services. States can benefit from the federal government taking a lead role in supporting mechanisms for technology transfer which will allow for networking of information between states. This could be accomplished through providing a conference for state representatives on the current "state of the art" in independent living services. States could also benefit from the federal government funding demonstration grants which promote coordination of community resources in developing independent living services. Examples of such grants might include projects which exemplify coordination between runaway shelters, public schools, the juvenile justice system, and/or job training programs and the child welfare agency. Finally, states face barriers in targeting funds for independent living arrangements. Basically, states are limited to using federal funding for payment to only licensed facilities. The federal government could provide technical assistance to states who want to develop licensing requirements for independent living arrangements.

Agencies requested information about the successes and problems in developing independent living services experienced by existing programs. Part II of this report provides development and implementation issues identified by the public and private agencies contacted for this study. It also outlines questions for state and local child welfare professionals to consider in addressing the long range needs of all youth in care and specifically the resources and services necessary to meet the needs of older youth in care facing discharge.

PART II

PLANNING INDEPENDENT LIVING SERVICES FOR YOUR STATE

As presented in the earlier chapters, the continuum of independent living services identified is not a discrete program for 16-18 years old, but a process which allows for the developmental stages of all youth in substitute care to be met in order to prepare them for self-sufficiency. This process can be implemented for all youth, regardless of their case plan goal because it does not limit the definition of permanency planning to a type of living arrangement. Instead, it focuses on the long range needs of all youth in care, no matter what their future living arrangement will be.

This is the philosophical framework in which this study has addressed independent living services. From a practical perspective it has also identified the specific resources and services necessary to meet the needs of the older youth in care who are facing discharge with little preparation for self-sufficiency. Part II of the report provides suggestions for planning and implementing independent living services necessary to meet the needs of older adolescents. First, it will outline some general questions that should be answered when identifying your state's goals and objectives for service delivery. Questions to answer about the adolescent population served by your system are then presented. Finally, questions to consider in implementing the continuum of services outlined in Chapter 3 are provided. This part of the report also includes a discussion of implementation issues identified by public and private child welfare professionals. Also included is a bibliography of articles about independent living services and curricula that have been developed. It concludes with a directory of current independent living programs that have been developed throughout the country.

1. QUESTIONS TO CONSIDER FOR PLANNING AND IMPLEMENTING INDEPENDENT LIVING SERVICES

To begin with, there are some basic questions which should be considered about the overall objectives and policies of the service delivery system in your state. These include:

1. Are there state policies or local practices that encourage youth to become dependent instead of independent? Can any of these be changed? How can they be changed?
2. Is there an understanding by your caseworkers of the developmental needs of all able youth in substitute care to eventually become self-sufficient? Is there an understanding of the types of services necessary to help youth achieve this goal? What type of training are caseworkers currently being provided in this area?
3. What case review processes are conducted for all youth, and particularly adolescents? What role does the youth play in these reviews?
4. How are independent living service needs of youth tied to the permanency planning process in your agency? Do case service plans address the self-sufficiency needs of youth in care regardless of the youth's goal? Are examples or guidelines provided?
5. To what extent do your state and/or local agencies outreach to the community to educate the people about the service needs of youth in substitute care?
6. Is there a staff person to develop policy, programs, etc., which address independent living services?
7. How will the effectiveness of services provided be evaluated?

There are also questions which need to be addressed about the adolescent substitute care population in your state. These include:

1. How many adolescents does your agency serve? Where do they reside (foster home, group home, RTC)? Where are these youth located geographically? How can the service needs of your rural adolescent population be met?

2. What type of population is included in the definition of adolescents? The adolescent foster care population is not a monolithic population but consists of many types of youth. These include the foster child who has lived in a stable foster home for many years; the child who has been in multiple placements; the vulnerable adolescent who has a chance of making it with intensive support services; the multiply handicapped child who will need continuous services from multiple agencies.

3. What are the social, emotional, education, employment and basic skills needs of adolescents facing discharge? How will you assess which youth need which types of training?

4. How does your agency currently handle its adolescent caseload? Are there changes you would like to see made (e.g. adolescent units)?

These questions have been posed to have you think about the objectives of your service delivery service for all youth in care, and particularly adolescents. The specific practice and procedural questions that also need to be addressed are presented below by the various phases of the continuum of services discussed earlier.

Phase 1: Informal process, observation and practice within the context of daily living experiences.

1. Is there an understanding by caseworkers, foster parents and other service providers of the informal process of teaching independent living skills?

2. What are foster parents, group homes, RTC's currently doing to prepare youth for independence? Are independent living skills required as part of the contract? If not, how can this happen?

3. What pre-service, in service training are foster parents given to teach how to incorporate independent living skills? If none, can this be added to the current training program? Is there an active foster parent association that you can get to support this issue?

4. Have caseworkers been trained to help youth do as much for themselves as possible to promote a sense of self worth and accomplishment?

5. What other community resources (public and private) are available to help prepare youth for independence? How can your agency access the cooperation of these agencies in providing independent living services?

6. How do the key players who provide services to youth (foster parents, case workers, other care providers) coordinate their efforts? Are there any formalized procedures established to insure coordination? If not, how can these procedures be incorporated into your system?

Phase 2: Formalized Skill Training

1. Is there an understanding by administration, caseworkers, foster parents, other service providers of the wide spectrum of tangible and intangible skills that youth need to master in order for transition to living on their own? If not, how will this knowledge be acquired?

2. Which youth will receive independent living skills training? How will you assess which youth need which types of training (e.g., age, goal, IVE eligibility)?

3. Who will provide skills training to youth (foster parents, caseworkers, volunteers, contracted agencies, other state or county agencies)?

4. If skills training is to be provided by caseworkers or foster parents what type of training will they receive before being expected to train adolescents?

5. What community resources have established training programs that your agency can use (e.g. schools, JTPA, mental health facilities, public health facilities)?

6. How will the effectiveness of services provided be evaluated?

Phase 3: Practice Living Arrangements

1. Do state law, policy, or licensing regulations permit youth to live independently while still in state custody?

2. Is there an understanding of the variety of independent living arrangements that can be developed for youth?

3. Have group homes or RTC's incorporated independent living arrangements into their current programs? Are these residential programs viable resources for developing and supervising independent living arrangements?

4. Is there an understanding that basic skills must be taught before a youth moves into a supervised or unsupervised living arrangement?

5. If you are planning to develop independent living arrangements have the following issues been considered?

   - Eligibility criteria;
   - Subsidies;
   - Agency role;
   - Supervision;
   - Contracts with the youth;
   - What services will be provided for youth not considered eligible.

6. How will effectiveness of services be evaluated?

Phase 4: Self-Sufficiency

1. What type of exit plans are established with youth facing discharge from substitute care?

2. What type of documentation do youth receive at the time of discharge (e.g., life books, community resource guides, health records, birth certificates)?

3. What type of after case services are available for youth who have been discharged from care?

4. What community resources are available to provide after care services?

There are alternative ways to develop and implement independent living services. Each state must step back and assess their current delivery systems to ascertain how to most effectively impact the needs of the populations they are serving. The addition of independent living services are an expansion of the permanency planning service system already in existence and should not be considered a discrete new program. The following section outlines specific issues identified by public and private child welfare professionals who are currently operating independent living programs.

2. ISSUES IDENTIFIED BY PUBLIC AND PRIVATE CHILD WELFARE PROFESSIONALS

Through discussions with public and private agency administrators, program developers and caseworkers, the following issues were identified to consider when implementing independent living services. The list of issues is not intended to address every concern, but rather to highlight those issues that were raised during the discussions.

Community Support. When developing independent living services it is important to first develop linkages with the community. "Community" is broadly defined to include the Department of Social Services (DSS), other public agencies (Employment and Training Division, Joint Training Partnership Act, public health facilities), mental health providers, agencies offering supportive services, civic groups, churches, employers and landlords. It is essential to develop a network of services which will support youth in their efforts and activities. It is also important to enlist support of the DSS lineworkers and supervisors to ensure awareness of the need for independent living services and to generate sufficient and appropriate referrals. Mental Health services will often be needed to provide intensive therapy and other related services. Linkages with agencies/organizations which provide services such as GED preparation, JTPA, "Big Brother" programs, sheltered workshops, Good Will, etc. may be accessed to prevent duplication of effort, unnecessary strain on funds and to increase the participation of youth in the larger community. Civic groups and churches may be targeted to generate public support or pressure for the program as well as providing donations, volunteers, role models, housing and possible jobs, and apprenticeships. Employers and landlords can be recruited to ease the transition by agreeing to work with the program youth in providing jobs and skills and needed housing, both of which are needed for youth who have no "history" of employment or credit. Also, it may be helpful to reach agreements with utility providers to allow for reduced charges for service connection fees and deposits. The media can also be involved to generate publicity and increase general awareness of the needs of foster care youth and independent living services.

Respondents indicated that advisory boards which include members of various organizations help to promote awareness, consideration and commitment among agencies. Respondents also stated that it was critical to engage neighborhood support when establishing an independent living group home. They indicated that it was often necessary to implement "a best neighbor on the block" approach. This might include having a well manicured lawn, or even volunteering to help neighbors with their yard work.

Identify Service Needs. Before beginning a program it is necessary to clearly identify service needs (i.e., potential population) and service gaps. This assessment phase will be helpful in defining program objectives, a target population, and potential services. It will also allow the agency the ability to assess whether or not they can provide services within the confines of their current structure or to identify the changes (program, philosophy, personnel) that need to be implemented to accommodate independent living services. After determining the services, objectives and program structure that will be necessary, agency professionals recommended that everything be reviewed, for it should be expected that revision will be needed. The program must always remain flexible and responsive as clients needs change. This means philosophy, services, eligibility criteria, objectives, must be "elastic to be realistic."

Determination of Client Population. Before a program begins an agency must clearly determine what type of client will benefit from the services that will be provided. Eligibility Criteria in terms of age, ability, maturity, behavior, intellect, disability, and referral sources must be established for a number of reasons:

(1) To ensure that services will meet the needs of the youth entering the program;

(2) To prevent referrals of inappropriate clients; and

(3) To decrease possible drop-out/kick-out rates.

Youth facing discharge have a vast range of capabilities and experiences. These can be generally divided into three categories.

(1) The "successful" foster care youth is not a problem client, has obtained some basic life skills and needs some assistance in transitioning to independence. This is the youth that will succeed, despite the system.

(2) The "problem" foster care youth who has had multiple placements, may have behavioral/emotional problems, runaway episodes, is unable to live in a family setting, and has no placement alternatives.

(3) The foster care youth who falls between the two extremes.

These three groups do not need the same types of experiences, supervision and supportive services. Therefore, it is important that an assessment of the youth's capabilities (skill level, emotional readiness, etc.) be done on every child before deciding on the appropriate independent living services needed.

Another factor to be considered is the mixing of client populations, in particular, dependent and delinquent youth. Varying opinions on mixing dependent and delinquent youth were expressed. Those who felt it was not a good idea said that dependent youth are behind in maturity and social skills and are therefore exploited by the "delinquent" who have better social skills and are therefore able to con the dependent youth. Also, these two populations may have very different service needs. For example, dependent youth may need more self-esteem building and basic life skills training while "delinquent" youth may be more street-wise about "making it" in the community and would need services to channel their actions into more acceptable avenues. Those in favor of mixing the two populations say that in a program the populations are not distinguishable, and the different needs are easily met by the services provided.

Age to Start Providing Independent Living Services. As discussed earlier, skills (both tangible and intangible) necessary to promote self-sufficiency are acquired throughout a youth's development. Many respondents emphasized this philosophy and indicated that waiting until a youngster was 16-18 to begin to address these issues is too late. Different skills need to be acquired at different ages.

The youths faith in his/her own capabilities, emotional readiness, decisionmaking skills cannot be developed at the time the youth is facing discharge. These components must be incorporated into the services provided youth in substitute care from the time they enter care, and whether or not they will return home. Preparation for independence must be a long range plan with short term goals established and achieved at various stages of the youth's development.

Experience Based Learning. Many youth who have experienced long-term placement and/or multiple placements are behind academically and in their maturity/socialization skills. These youth lack may of the stable nurturing experiences which allow children to successfully progress and meet the challenges of new experiences. Because of these developmental lags, youth are often turned off or are unable to integrate learning which is presented in a school-oriented manner (e.g., workbooks, homework). It seems that youth respond best to experience based learning which allows for direct participation, an opportunity to learn from mistakes and even to fail. For example, cake baking should include eggs on the floor, and budgeting should include running out of money. This idea is tied to beginning preparation early so that frustration caused by initial failures is not compounded by the pressure of imminent emancipation. It is important to maintain a position where the youth is responsible for his own actions and the consequences of these choices. Those working with youth must limit their desires to be protective of the youth and to do things "for" him/her. This means being flexible, having reasonable expectations, allowing some room for mistakes and failure, and offering support for achievement. Tasks may need to be partialized into short-term goals which are achievable and build up to larger goals. The program needs to be viewed as a positive step in the process toward being adults rather than something being "done to" the youth by the system.

Structure vs. Freedom Within an Independent Living Program. As discussed above, it is important to allow youth to experience the skills needed for independence as much as possible. Some youth may react to this situation by behaving in a dependent manner, becoming immobilized and unable to perform tasks. Other youth may experience the freedom by overreacting behaviorally and feeling they can do anything they want (e.g., using drugs/alcohol, being involved in inappropriate sexual or delinquent activities, and being influenced by "undesirable" peers). Enough freedom needs to be allowed to learn and make mistakes, even to behave inappropriately. However, limits need to be set by having consequences for behavior.

The agency must be willing and able to use different structure, limits, supervision, staff roles, than in other aspects of its service. This may be difficult adjustment for staff. Training, support and encouragement are necessary for staff in areas where they may lack experience (e.g., encouraging independence rather than perpetuating dependence by protecting the youth). It becomes particularly important for staff to adjust their expectations to meet individual client needs.

Help Youth to Develop Relationships. Due to multiple placements, disruptions in life experiences and past rejections, the youth in foster care are often significantly delayed in terms of maturity, ability to form relationships, and experiences in the community. Opportunities must be created to promote self-determination, positive interaction with adults, peers and other community members outside of the child welfare system. Community role models, social clubs, athletic teams, Big Brothers, dating, school activities, etc. may be used to help the youth experience a more "normal" adolescence. The youth must be supported to participate in such activities. Also, the youth should not be stigmatized or segregated because of his/her status as a foster child. It is important to involve youth in the community in order to (1) establish positive reference groups, (2) learn acceptable behavior, and (3) become familiar with the surroundings they will confront after discharge from care.

Motivation. A key element in the ultimate success of a program is the motivation of its participants. Several respondents mentioned problems with initial dropout rates but had success once youth made some type of personal commitment to the program. Respondents also mentioned that youth needed initial phases to adjust to a program before deciding whether or not to fully join the program. Other programs have developed initial discussion sessions with the youth to explore the services that would be offered before actually enrolling the youth in the program. These sessions were designed to generate a time commitment on the youth's part before obligating agency staff time/resources.

Respondents mentioned a variety of ways to motivate youth to commit to a program.

- Have experiential learning rather than an academic approach to learning skills.
- Include youth in the planning of services he/she is to receive so that youth can take an active role in planning and participation.
- Frame independence as a positive step in a continuum of care, something to achieve.
- Provide experiences which are tangible and provide short-term results which can clearly show success. This will help to overcome the failure mentality of some youth and help to increase self-esteem and confidence.
- Allow freedom to make informal choices with a clear understanding of consequences for behavior.
- Rules must be understood in advance and applied consistently.
- Provide structure which is maintained by group member. (e.g., develop and enforce house rules, maintenance of living facility).

Supervision. Supervision, as in other areas, needs to be flexible. The individual clients will need varying levels of supervision as they enter a program. A mature youth may need less supervision initially but may need more during transition phases which may create a crisis, such as moving from a group home to an apartment.

Consideration must be given to what level of supervision (or non-supervision) the agency is able to accommodate. The agency may not be able to cope with the idea of unsupervised apartments in the community but a self-maintained unit or cottage on campus would be acceptable. Also, factors such as age, ability and mixed sexes must be considered and supervision adjusted as the need fluctuates.

Hiring staff who can provide flexible supervision should also be a primary consideration. Issues of commitment, turnover, ability to access resources, flexibility and pay must be considered. Promoting independence is very different from the traditional "baby sitting" function of child care staff and the "normal" role of house and foster parents.

Funding. Many programs expressed difficulties with financial resources. This may limit the scope of the program, the availability of staff/services and the ability to help sufficient numbers of youth transition to independence. Funding sources also become an issue as far as what the service was/was not able to do. For example, if a program was funded through a church affiliation, certain behaviors might become reason for ejection from the program. On the other hand, private funding sources rather than public funding can allow service delivery to be more flexible. Privately funded agencies have more flexibility in extending care past age 18, providing money to help finance college or vocational education, and paying for apprenticeships. These issues should be considered when planning to develop a program and funding is being pursued. Program providers also indicated that there needs to be provisions to allow funding to be used flexibly to accommodate overall changes/fluctuations in the needs of the program and its participants.

3. DIRECTORY OF PROGRAMS

D I R E C T O R Y   O F   P R O G R A M S

FORMAL LIFE SKILLS TRAINING PROGRAMS

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Orphan Foundation "Project Bridge" Joseph Rivers P.O. Box 14241 Washington, DC 20044 202/861-0762	o Private, nonprofit foundation o Life skills training	o To fill service gap for foster care youth nearing emancipation o From personal experiences of founder as an orphan and foster child	o Foster care and orphaned youth ages 16 and over	o Life skills training through group meetings over 8 weeks o Trained volunteer advisor assists youth for minimum of 6 months during emancipation transition	o Developing funding resources to maintain private, nonprofit foundation o Strains on paid staff to develop program and facilitate community awareness o Program is still in its infancy	o Potential to fill gaps due to lack of other national programs o Service is needed	o Founder would be available to work with any interested persons	o Volunteer Advisor o Media o Planned Parenthood o Business to raise funds and resources, e.g. food stores o Networking among personal contacts to obtain support
Children's Bureau of Indianapolis Alisa Freedman 615 N. Alabama Indianapolis, IN 46204 317/634-6481 "Emancipation Program"	o Private, nonprofit child welfare agency o Life skills training	o Agency identified need among client population o Developed new program utilizing resources and materials from other similar programs implemented in schools o Agency offered to perform services for 8 county region welfare depts. and was awarded a Title IVB grant	o Wards of the 8 county welfare depts., ages 16 to 18	o 11 groups met during 1 year period of grant for life skills training over 10-12 week period o Field trips (e.g., to apartments) for experiential learning o Youth set 3 goals as to what want to achieve and these were used for evaluation of program	o Transportation for youth to attend group o Some resistance from foster parents o Dropout rate due to events (e.g., jobs) in youths' lives o Program not refunded	o Use of active exercises, e.g., role play, group budget o Relationship discussion near end of program after group has been established o Transference of group discussion knowledge and experiences to real life situations - evidenced through follow-ups with client population members	o Being aware of any potential problems, e.g., transportation o Begin with population larger than number expected to complete program	o Banks, stores, apartments for field trips o City GED and job training program o Business contacts for life skills exercises

DIRECTORY OF PROGRAMS

FORMAL LIFE SKILLS TRAINING PROGRAMS (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
"Project Image" Mr. Parrott 10400 Detrick Ave. Kensington, MD 20895 301/933-9750	o Public housing administration o Life skills training	o Identified problems of youth living in public housing (e.g., school performance) and developed youth services program	o "At-risk" youth ages 8-17 o Project funded by Housing Dept. and United Black Fund	o Services include cultural enrichment, self development, tutoring, remedial education, career development, vo-tech schools, and field trips (e.g., to factory) o Parent must be involved with youth and program o Match youth with Big Brother/Big Sister o Parent education and workshops	o Funding resources are never enough to fill needs of program o Participants must make 1 year commitment - youth, parent and Big Brother	o Ability to network with other agencies (e.g., schools) to fill service needs o Program may deter entry into other systems, e.g., welfare, substitute care	o Do not duplicate an available service o Identify existing need and service population o Use as a diversionary program, e.g., prevent school dropout	o Recreation Dept. o Youth services o Summer employment o County extension service o 4-H Club o Planned Parenthood o Minority affairs o NAACP o Fraternal organizations o Business community, e.g., College Day, career seminars
Catholic Charities Center	o Private child welfare agency o Life skills training	o Were asked to develop pre-emancipation program by DSS	o Youth ages 16-22 in foster care or own home	o Group meeting to teach life skills curriculum and build relationships o Emphasis on counseling component of service o Program is for 1 year o GED preparation	o Lack of alternative living arrangements for youth o Initial dropout rate during first quarter	o Significant number of youth obtain GED o Youth are able to achieve independence	o Identify support of funding agency o Contract with funding/referral agency, e.g. Expectations o Clarify criteria for acceptance to program	o Public agencies o Alcohol rehabilitation o County nurse o Counseling services

FORMAL LIFE SKILLS TRAINING PROGRAMS (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Children's Home Society "Life Planning Services" Virginia McDermott 2230 Como Avenue St. Paul, MN 55108 612/646-6393	o Private child welfare agency service o Groups for youth to address self/separation and grieving	o Individual's experience with issues of adopted child led to concern for issues faced by foster care youth without family o Developed with agency and private foundation	o Youth ages 10-23 o Work with birth, foster and potential adoptive families o Referrals from corrections and county social services agencies	o 12 week group format to explore issues of family connections and foster care from acknowledgement of self/separation/grief to development of life book o After group have staffing with DSS county and court personnel for case planning and case conference with family resources	o Staffing plan may not be implemented and outside agency not able to follow through on suggestions	o Group model as vehicle lowers defenses and increases sense of community through shared experiences of youth o Trust developed from attentiveness of group leaders to foster case experience, e.g., person able to articulate feelings of youth o Idea of staffing with county DSS is advocacy for individual and education of system for change	o Spend time informing people to get commitment to program, e.g., identify participants o Obtain reliable transportation to insure attendance o Hire sensitive staff and those capable of learning permanency planning issues o Have staffing and case conference to bring sense of closure	o Case records o Interviews o Infant hospital records o Photographs of the places where youth have lived o Utilize other professionals as consultants
Amarillo DHR Life Skills Project Pat Devin P.O. Box 3700 Amarillo, TX 79116-3700 806/358-6211	o Public child welfare agency o Life skills training within foster homes	o Was awarded grant for demonstration project based on proposal submitted	o Youth ages 14-18	o Weekly life skills training workshop o Recruitment of foster homes to be trained using Nova University model o Consultant hired for group therapy o Planned match youth with community volunteer as career role model	o Funding available for only 2 staff positions o Having adolescent unit affects staffing pattern, and time per case o Difficult to recruit foster parents for this age group and to prevent loss through burn-out	o Excellent peer support o Have recruited foster parents and made placements o Good teenage participation	o Have stamina to maintain commitment to program o Staff must be interested in age group and have experience to work in specialized unit o Supervisor must give staff lots of support o Identify funding for additional staff	o Guest speakers from employment commission, Planned Parenthood, Parenting Services, college/university o Consulting psychologist o Recruit volunteers from American Business Club

FORMAL LIFE SKILLS TRAINING PROGRAMS (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Children's Home Rosalie Deutsch 1001 Reynolds Road Winston-Salem, NC 27104-3245 919/722-3604 919/723-1808	o Agency founded as orphanage, moved to custodial care, has recently placed emphasis on counseling and work with the family o Life skills training	o Agency identified need as youth from exiting program without "survival" skills	o Youth ages 16-18 o Referrals from DSS, courts, hospitals and parents	o Transition program to prepare youth for adult life, e.g., from foster care or own home to independence o Levels system of skill development from basic skills to obtaining housing and moving in o Counseling to prepare for and maintain employment o Forced savings plan o Scholarship fund for post high school education o Individual and group counseling	o Group counseling does not always "fit" with intent of program, e.g., due to schedule conflicts and emphasis on self-reliance o Inappropriate referrals to program, e.g., youth need preparation/treatment before able to work on issues of independent living	o Assisting youth in completing education goals, e.g., vocational, GED o Opportunity for youth to obtain first job, even though they may not be able to maintain job	o Involve the youth in developing cottage rules and consequences o Place emphasis on independence rather than dependence (reduce structure)	o Schools, e.g., vocational, GED programs o Businesses for employment, e.g., cooperate with program goals o Summer youth employment o Planned Parenthood
Specialized Adolescent Caseload Project 2105 State Street Hamden, CT 06511 Ralph Zona (Department of Children and Youth Services) 203/786-0641	o Public child welfare agency o Life skills group	o Caseworker who identified need for peer group meetings for multi-placement youth who face discharge from foster care with little if any support systems	o 14-21 year old multi-placement youth in state foster care system	o Life skills training through group meetings once 16 weeks o Skills training includes vocational training, job interviewing skills, knowledge of community resources, money management, sex education, etc.		o Incentives to participate of up to $100 in additional monies for clothing vouchers are used		o Speakers from local agencies o Role models from the community

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Freedom Through Choices Mr. Mark Williams Dr. Gloria Fauth 903 Webster, N.W. Washington, DC 20009 202/726-8518 Sponsored by The Center for Youth Development 1025 Thos. Jefferson Street, N.W. #400E Washington, DC 20007 Pres., Lawrence Manley	o Private, nonprofit o One program of The Center for Youth Development o Residential living with life skills training	o In response to Mayor's directive to phase foster care youth out by age 18, the agency developed program and convinced DHS to adopt the program	o Foster care youth ages 16 and over	o Life skills training with focus on youth taking action for self and experience based learning with peer support o Youth develop own plan for IL and are involved in all aspects of the program o Emphasis on involving youth with community and private sector to achieve goals o Weekly peer support group meetings o Weekend and week retreats for residential living/learning experiences o Internships in business for pre-employment experience o Volunteer advisor	o Getting youth involved in program - youth are angry at system and need to see service as not something being "done" to them o Never enough money - need long-term commitment of DHS and community priority to independent living services for youth	o Use of peer support creates sense of community and hope for the future o Experience based learning o Residential retreats	o Be open ended and responsive to needs of individual youth o Visit program to learn how it works o Training of staff to assist youth in development of skills (operationalize skills training) o Need to start youth at younger age because need more than one year to prepare them	o N.Y. State life skills training manual o Planned Parenthood o Drug rehabilitation o Voter registration for political advocacy o Grants from foundations o Private sector for skills resources o Business people for Choice Partners o Are making a record album for fund raising

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Florida Sheriff's Boys Ranch Girls Villa Jim Strayer P.O. Box 5 Boy's Ranch, FL 32060 904/842-5501	o Program operated by the Sheriff's Department o Has several locations in the state o Residential treatment center with life skills training	o Independent living skills developed from experience of being part of a working ranch	o Ages 13-17 with preference for over age 15 o Program has high visibility and requests for services come from families, DHR, courts and private doctors through the Sheriff's Office	o Youth Growth Plan to develop experiences in 9 main areas o Employment begins with "mock" on campus experience leading to off-campus jobs at 16, includes vocational exploration, tech school and college o Cottages do own shopping, cooking, laundry, etc... o Self-esteem building through gaining sense of ability over failure, e.g., driving tractor, horseback riding o Sponsor families for weekend visiting o Individual and group counseling, social services for up to 36 months o After care for 1 year plus network of support services o Annual awards banquet to recognize individual achievements	o Typical teenage behavior, e.g., drinking, drugs, sex, money management o Early preparation helps limit problems o Youth with college or vocational aspirations are more motivated	o Experiential learning, e.g. cottage management and farm work o Having 12-18 months to accomplish goals o Campus school - alternative to public school and vocational exploration o Entire program as a means to catching up and preparing for the future	o Visit program o Define target population - program is for in-between group, e.g., can't live at home but not delinquent or seriously disturbed o Have a board of directors to aid with training	o Planned Parenthood o Sponsor Families o Big Sisters o Justice system o Vo-tech schools o Local churches o Businesses o Surplus commodities program

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
The Casey Family Program Hilda Mauzerall 5858 Emerald Street Boise, ID 83704 208/377-1771	o Privately funded foster care agency o Group home with skills training and experiential learning	o Agency identified need for independent living services among older youth "raised" by the Casey Foundation	o Older adolescents being served by the agency and nearing emancipation	o Preparation phase in foster home before entering "Lemon Grove" program o Life skills curriculum o Responsible for self (e.g., laundry, work) with supervision o Youth pay rent o Vocational training, apprenticeships o Volunteer advisor as career role model o Financial assistance for college o Weekly group and experiential learning of life skills o Aftercare for transition to independent apartment o Group home serves 6 youth	o House parent and staff relationships to promote independence in youth while maintaining caretaker role o Have gotten "tougher" with youth to push self responsibility	o Ability to provide continuity of staff, service and community o Agency is well funded by parent organization		o Volunteer advisors o Public transportation
Group Homes for Children Howell Center Joan Marshall 3307 Longlois Lafayette, IN 47904 317/742-2017 "Training for Independence"	o Group home with skills training	o Agency had underused facility available and DSS identified need for transitional living service for youth nearing emancipation	o County wards ages 16 1/2 - 18 o Females only	o Experiential life skills learning through cooperative nature of facility maintained by youth o Full-time activity of school, employment, volunteer work o Life skills curriculum o Sexuality training every 3 months thru Planned Parenthood o Community friend, e.g., "Big Sister" o Group home licensed for 6 youth	o Originally planned as "teaching", is actually "real life" experience that works best o Agency began with unrealistic expectations o Maintaining facility with purpose which differs from other agency programs, e.g., "letting go" of youth so they can learn	o Cooperative nature of facility aids in learning to get along o Experiential learning o Allowing youth freedom to fail, make mistakes o Youth do weekly self-evaluation report o Establishment of unusual relationship with DSS to allow for program to work	o Service must be experiential o Need motivates youth, e.g., not levels and games but emancipation o Cooperative nature makes youth responsible to self and others in maintaining program o Orientation period to evaluate youth's ability to use service	o Planned Parenthood o JTPA o Reading Academy o School system o Community services o Community friend

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Buckhorn Children's Center Mr. Cantrell Buckhorn, KY 41721 606/398-7245	o Private, nonprofit o Residential treatment center with skills training	o Following recommendations of C.W.L.A. for aftercare program	o Agency youth ages 15 1/2 - 20	o Preparation for independent living through community based life skills learning o Job skills training o Education through public school or GED with some funds available for college o Group and individual counseling o Family volunteers for visiting resources, e.g., Christmas	o Location in college community limits access to resources for youth, e.g., jobs and vocational problems o Finding balance of freedom and limit - youth need to experience but emotional and behavioral problems may limit ability o Need for transitional apartment phase	o Program works well for youth who are college oriented due to location in college "owned" town	o Maintain coed program o Staff role to facilitate independence o Broad range of skills and services are needed for independent living program to work, community relations must be facilitated	o All public school programs o Mental health services for intensive counseling o Local college o Planned Parenthood o Business community o Agency relationship to parent organization, i.e., church o Community churches for sponsor families
FACETS, Inc. Diane Frijia P.O. Box 398 Fallston, MD 21047 301/557-9192	o Private, nonprofit o Group home with life skills training	o Agency identified gap in service for youth nearing emancipation	o Males over age 17 who are mature, ready to graduate from group home o Referrals from social and juvenile services	o Transition from structured group home to independence through maintenance of facility under staff supervision o Experiential life skills (e.g., part-time job) plus use of curriculum o Individual and group therapy	o Length of time needed to develop funding o Locating facility to house program o Rural area lacks many resources, e.g. transportation, social activities o Community acceptance of youth in program	o Developing independent living phase as positive step in transition o Providing transportation as supportive service o Provision of services on case specific basis	o Visit a variety of programs, interview clients o Develop community support for program o Be aware of all aspects of service need	o Business persons as speakers for life skills o Parks and Recreation services - youth act as coaches and "Big Brother" o summer youth employment o local business council for employment

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Tri-County Group Home Dennis Scott P.O. Box 157 Chaptico, MD 20621 301/884-4718	o Private agency o Group home with skills training	o Agency identified service as youth were not prepared for independence at completion of normal treatment	o Youth from agency group home ages 16-18 o Components integrated into overall program o DSS licensed	o 8 part life skills curriculuim including recreation/social development, buying a car, urban experience and cooking o "Graduate Program" for youth to live in independent facility on campus o Peer group, family and individual counseling o Aftercare for transition to independent apartment o "Graduate Program" serves 2 youth at a time	o Resistance to independent living as continuing care too long o "Institutionalized" population is developmentally handicapped, e.g., in maturity and mainstream experiences o Youth need therapy and life skills instruction o Transportation in rural area o Loneliness of youth after leaving group setting	o Raising status of "Graduate Program" to appeal to youth o Program has emerged as credible and valued by youth and community o Program has survived funcing restrictions o Developed and refined life skills curriculum o Acceptance of service has increased among deferring agencies, e.g., was seen as a "luxury" program	o Must be selective in staff able to work with youth to promote experiential learning o Establish community linkages for supportive resources, e.g., businesses o Be aware of actual resources and lacks in the community o Gain support of referring agencies to maintain self-interest in program	o Area businesses o Government agencies o Welfare department for mock interviews
Wedgewood Acres - Christian Youth Homes Dick Gritter P.O. Box 8705 Grand Rapids, MI 49508 616/942-2110	o Private child care facility o Residential treatment center with life skills training and experiential learning cottage	o Youth in care have had multiple placements and lack appropriate resources at exit o Developed as part of continuum of services as alternatives are not available	o Agency youth over age 16 at time of admission o 1/3 from DSS o 1/3 from Juvenile Court o 1/3 from Mental Health Services	o 8 bed unit maintained by youth for experiential life skills learning o Employment training o Survival skills curriculum, e.g., how to... o Must be in school or vocational training o Community families for additional support o Individual and group therapy o Weekly contact during transition to independent apartment o Agency channels DSS subsidy payment to youth	o Obtaining adequate housing and employment o Youth's history influences behavior, e.g. abuse, multiple placements o Adjustment period of transition to independent apartment is difficult, e.g., fear o Youth may display poor judgment, e.g., friends	o Overall thrust of program is to make transition, access to child welfare is limited by age and youth must be prepared o Combination of preparation for independent living (practice) and actual experience	o Spend time looking at other programs, meet with line staff, learn "nuts and bolts" of the program	o Business people o Volunteers, e.g., community families o Vocational training programs geared to differing levels of ability

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Children's Home Society "Lincoln House" Mary Lou Gladhill 2230 Como Avenue St. Paul, MN 55108 612/646-6393	o Private child welfare agency o Residential program with life skills training	o Agency identified need as youth were unable to maintain living situation after exit due to lack of skills	o Teen mothers o Referrals from corrections and social service agencies	o Residential program with parenting education, life skills and day care components o Are developing packets for life skills training o Vocational training through Project 70001 o Community programs and volunteer tutors for education o Trained role models to work on 1 to 1 basis o Assist in finding resources for independent phases o Aftercare as requested o Parenting groups o Licensed for 13 women plus their children	o Immediate needs of youth may place independent living skills in 2nd place, e.g. behavior limits ability to work on skills	o Use of small group and written materials for life skills o Residential, group and individual components work together	o Provide hands on learning experiences o Begin at very basic ability level, don't assume anything	o During last phase work with youth to identify and access needed resources, e.g., daycare, clinics, housing o Project 70001

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
St. Joan of Arc Patricia Bednara 7534 Natural Bridge Road St. Louis, MO 63121 314/531-0511	o Private child care agency o Group home with life skills training and experience	o Agency identified need for youth not appropriate for group homes and exiting RTC without adequate life plan	o Females ages 17-21 o Outreach to street youth o Some referrals from DFS	o Provide basic life skills and increase responsibility through maintenance of facility o Youth must be employed within 2 weeks of entry o Forced savings plan o May enroll in school or college o Counseling through house parent, group meetings and casework services o Assist transition to apartment with startup costs and basic supplies	o Are more referrals than agency can serve o Immaturity of youth makes adjustment, self responsibility and structure difficult o "Free ride" thinking - youth must be accountable to group, not only to self	o Time to finish education, maintain employment and obtain living arrangement o Ability of group to live as a family while learning skills and strategies to cope, e.g., problem solving, mutual acceptance o Learn alternative to street life o Outreach to youth who fall through gaps	o Study where, what, when and who of program o Discuss program with person who has had experience o Define target population for screening criteria and to prevent chaos	o Church affiliation, e.g., parish community and clubs o Articles in local paper to increase awareness and get volunteers o Speak at community groups, e.g., City Council
Connie Maxwell Children's Home Phillip Russell P.O. Box 1178 Greenwood, SC 29648 803/223-8321	o Private, residential child care agency o Combination of life skills training and cottage on campus	o Agency had developed self-contained independent living program which was discontinued due to lack of participants o Independent living is now integrated into aspects of regular program	o Older adolescents served by agency	o Independent living skills on individual basis o Cottage of females maintained by youth under supervision, e.g., cooking, cleaning o Group home for concrete use of life skills o Higher education assistance for college, GED or vocational training subsidized by agency o Increasing privileges and responsibility as demonstrate ability, e.g., use of car, jobs, schedule own appointments o Sponsor families through churches for visiting	o Abilities of youth differ greatly, e.g. unrealistic expectations o Lack of agency clients of age/ability to participate in original formal independent living program	o Summer work program through JPTA and employer incentives o Youth taking responsibility, e.g., scheduling own appointments o Meal planning and preparation in female cottage	o Identify sufficient client population to maintain program o Program must be seen as a positive step, e.g., level to aspire to o Set clear guidelines and expectations of youth's responsibility o Presentation of life skills is crucial, may encounter resistance to guidebooks	o JPTA o Public schools o Church sponsor families

D I R E C T O R Y O F P R O G R A M S

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Pendelton Place Annex Marshall Barnes 1117 Pendelton St. Greenville, SC 29601 803/235-6270 803/242-6667	o Private child care agency o Group home with life skills training	o Community identified need, agency obtained access to an available facility and developed independent living service as low cost program o Agency had staff member familiar with independent living	o Female youth ages 16-20 o Referrals from state o State funds staff and agency manages program	o Youth maintain facility with supervision of houseparent o Must be enrolled in an education program o Community volunteer (e.g., Junior League) teach life skills sessions o Sponsor family/Big Sister for all youth o Counseling by agency social worker, caseworker and houseparent o Life skills training with workbook, Making It On Your Own o Mental health counseling	o Youth's ability to use community resources o Youth's acceptance of aftercare services o Encouraging independence may lead youth to "outgrow" program before ready for emancipation o Balance between structure and freedom o Influence of boyfriends o Self not group focused concerns of youth o Bonding with staff o House counsel form of government, e.g., blackmail each other	o Youth return as adult and say program has had positive influence on their lives, e.g., use of guidebook o Program provides alternative to streets for youth 17-20 o Provides youth with opportunity to make life choices o Provides continuum of care, e.g., shelter to group home to independent living program	o Funds to pay staff adequately and to provide enough supervision o Take time to plan o State must start early in permanency planning to accept independence as an alternative and to provide timely referrals o Begin preparation services at an early age o Look at using former clients to do group work with present residents	o Junior League o United Way o Church groups o City and county redevelopment authority, e.g., leasing and renovations o DSS contract o Mental health o Job services o Volunteers
Abbott House, Inc. Jim Karstens P.O. Box 1085 Mitchell, SD 57301 605/996-2486	o Private, residential child care agency with experiential life skills training	o Independent living skills as component of residential learning experience	o Behavioral/emotionally disturbed female youth o Referrals from DSS, Dept. of Education and Office of Indian Affairs	o Experiential life skills training, e.g., cooking, laundry o Self-esteem through 1 to 1 approach, e.g., values clarification o Pre-employment through participation in "mock" on-campus work experience o Assist in transition to unsupervised living and aftercare	o Youth may reside in non-local community thus limiting followup o Youth may not want to comply with aftercare agreement once discharged from program o Youth have difficulty with money management, e.g., rent payment	o Idea of independent living preparation to assist youth in transition to adult status o "Mock" work program gives youth employment experience and work reference	o Provide active aftercare for minimum of 3-6 months as adjustment period is difficult for youth o Preparation in as many areas as possible with realistic definition of success and realization of inherent difficulties	o Mental health center o College students o Planned Parenthood o County nurse o JTPA, though minimum age is problem o Summer employment o Individual employers, e.g., motel, retirement center, fast food

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
McCrossin's Boys Ranch Walt Schaffer Rt. 4, Box 19 Sioux Falls, SD 57107 605/339-1203	o Private, residential child care agency o Combination life skills training and on-campus apartment unit	o Began as natural progression of services within residential program as level of achievement	o Male youth ages 17-19 and high school seniors o Referrals from Dept. of Corrections, Social Services and public schools	o Life skills training as part of residential program o Progress to on-campus apartment unit maintained by 4-8 youth, with 2 levels of supervision (based on need) in same complex o "Community Friend" for visiting on individual basis	o Self concept of youth influences ability to make decisions o Typical problems of teens, e.g., acting out o Program not in community, e.g., experience not completely realistic	o Flexibility of program to meet individual needs of youth	o Must gain experience in providing independent living services before starting program o Must individualize services as appropriate to youth's need	o Public school o Church o Recreation facilities o 6 month wagon train programs o Anything appropriate to youth's need o Work with livestock, e.g., hands on experience
Blount County Children's Home Chuck Gildrie 903 Louisville Maryville, TN 37801 615/982-6361	o Private child welfare agency with life skills training	o Have begun "simplistic" life skills prep with older teens and are planning to develop comprehensive program through independent living cottage on campus because youth panic as discharge approaches	o Agency youth nearing age of emancipation	o Basic life skills training within current program structure, e.g., youth assists with meal prep, shopping o Life skills education in home of volunteer advisor o Use of vacant on-campus apartment as semi-independent living and as place to return after discharge if problems arise	o Program currently lacks experiential living arrangements			

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Cumberland Hall Michael Heard 804 Youngs Lane Nashville, TN 37207 612/228-4848	o Private psychiatric center with transitional on-campus apartment	o Agency program to integrate client into community to prevent cycle of psychiatric readmission	o Intermediate program for youth ages 14 1/2 - 17 o Transitional independent living program for ages 17 to adult	o Intermediate program less restrictive than acute care with emphasis on school and pre-employment skills, e.g., campus landscape work o Transitional program - on-campus apartment with daytime off-campus employment and evening skills training o 4 per room in dorm to 2 to apartment				
Goodwill Homes Community Services, Inc. Henrietta Shelton 1590 Goodwill Road Memphis, TN 38109 901/785-6790	o Private child welfare agency o Group home with basic living skills training	o Agency developed group home program for high school youth in need of transitional services to learn management of own lives	o Females ages 17-21 in high school or college bound o Referrals from DSS, schools and agency youth	o Full-time school or vocational training with optional employment o Youth receives check and manages own finances o Life skills and pre-employment training o University students assist in locating jobs and tutoring o Assist in transition to own apartment or return home o Group and individual counseling	o Being too "free" and youth take advantage of situation, e.g., damages to facility o Curfew violations	o Having service available o Program is non-institutional, based in community using local services and not level system, e.g., is more "normal"	o Have dedicated child care staff o Have current participants assist new members in adjustment o Have life skills training and repeat as necessary	o Planned Parenthood o DHS parenting classes o Public schools o Mental health centers o Big Brothers/ Big Sisters o Fraternities/ sororities o Civic groups o University students

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Youth Intervention Center Mary Anne Springfield Nashville, TN 615/638-8071	o Private o Group home with experiential life skills training	o Agency developed program to assist youth in maximizing their ability to live independently	o Male delinquents ages 14-18 years o Referrals from Department of Corrections	o 4 1/2 month program where youth learn life skills through management of group home facility o Job placement and industrial skills workshop, youth may save up to $500 o Weekly social skills group o Youth may transition to another independent living program or apartment o Maximum 8 per group home	o Staff turnover due to high frustration level o Youth leave program to reside in other areas o Behaviors are established by time youth enter program and are difficult to modify	o Availability of workshop situation for youth who fail in school o Emphasis on youth to accept responsibility for behavior, e.g., options and choices with clear consequences for action o Use of behavior modification, e.g., youth earn right to visitation	o Design of facility to allow convenient supervision o Establish links with community support services, e.g., YMCA, drug rehab o Need for aftercare during transition phase o Establish criteria for accepting clients	o USDA surplus commodities o Mental Health center o Drug and Alcohol group home o DSS o Juvenile Court system o Local school, e.g., GED o Public health services o United Way, e.g., funding
Middle Earth Jerene Peterson P.O. Box 6503 Austin, TX 78762 512/482-8322	o Private emergency shelter care o Group home with experiential life skills training	o Began as placement resource for youth leaving shelter as alternative to street life	o Licensed for ages 15-17 o Referrals from DHR, MH/MR, Texas Youth Commission and self	o 3-6 month program with work orientation and youth set own goals o Group home facility maintained by youth with supervision o Life skills curriculum o Alternative education program, i.e., GED o Save 65-80% of earnings ($1500) to transition into own apartment o Nightly group meeting for interpersonal and life skills	o Maintaining adequate funds o Youth function as adults but live in placement, need to accept adolescent behavior as typical during transition to young adult status, e.g., how adult reacts to drugs o Having trained staff who are open and aware of youth behavior o Maintain philosophy to learn and grow, e.g., choices	o Individual and group counseling, e.g., skills and communication o Establishing employment history o Having flexibility to allow structure to meet needs of population, e.g., key role of staff	o Know population, e.g, institutionalized or streetwise o Be concrete in goals of youth and program o Awareness of community resources o Make situation as "normal" as possible o Be patient and understanding o Activities must be experiential	o Employment o Education, e.g., GED o Landlords, e.g., rent to under 18 o Work to make people aware of program, e.g., give youth a chance to succeed

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Baptist Children's Home Mills Home S.B. Langfitt P.O. Box 338 Thomasville, NC 27360 919/472-1000	o Private o Residential treatment program with basic life skills training	o Identified need for service to population of agency	o Youth ages 16 and older o Referrals from DSS and private placements	o Emphasis on preparation for independent living with skills taught by child care staff o Required to work or participate in training/education program, e.g., high school, GED o Assist with transition to independent living o Work with parent to help plan for youth	o Resistance for a variety of reasons by youth to moving from a structured living arrangement to a more independent living situation	o Children are prepared to live independently	o Involve parent(s) in planning for youth o Target program to youth over age 16 o Require youth to participate in work and educational training	o GED programs o Vocational rehabilitation o Agency staff o Local employers o Vocational training programs
Elon Home Debbie Reed P.O. Box 157 Elon College, NC 27244 919/584-0091	o Private, residential child care agency o Combination basic life skills training and special cottages on campus	o Agency looked at how it was "raising" youth and identified service need to prepare population for independent living	o Referrals from agency population, DSS, schools, families, hospitals, courts o Second semester juniors, seniors or young people at minimum age of 16, working on GED or night school program	11-18 month program using level system based on completion of skills packets including life skills, employment readiness training o Required academic participation o Counseling through mental health services o Assist in transition to independent living arrangement o Developing financial subsidy component	o Youth not completing GED programs o Obtaining sufficient transportation o Typical adolescent behavior o On-campus cottages promote dependence and create problems for youth in other cottages	o Youth are graduating from program by completing goals and following through with options/decisions o Youth must make voluntary commitment to participate in program, beginning at intake point	o Visit other programs to get ideas, fit them to setting and population o Establish network to support independent living programs in state o Youth need to experience living as they would in real world o Supervision of apartment living, i.e., youth rent apartments within homes (transitional stage)	o Mental Health services o Employers o Fire department o Police department o YMCA o Local college o Technical college o Dept. of Social Services o Juvenile Court o Vocational rehab

DIRECTORY OF PROGRAMS

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Children's Home Society "Transition House" Rhonda Strother P.O. Box 1448 Yakima, WA 98907 509/457-8139	o Private child care agency o Group home with experiential life skills training	o Based on need survey of the state	o Youth ages 15-18 o Referrals from DSHS for youth lacking other family resources and are experiencing emotional/behavioral problems	o Youth maintain group home with staff supervision o Life skills through outline and workbook curriculum o Emphasis on education, e.g., GED, vocational training o Assist in transition to independent living arrangement o Individual counseling o Aftercare through followup and holiday contacts	o Funding only covers 1/2 of actual program cost o Inappropriate referrals of youth from outside agency RTC program, e.g., too disturbed and need to adjust to group care environment	o Positive community experiences provided by program participation o Youth's ability to develop positive relationship with staff o Program provides an alternative for youth o Completion of academic/vocational programs o Acquisition of employment	o Develop core group of staff who are understanding and treatment oriented o Prepare needs assessment of population o Work with state system, e.g., contracting and referral o Define intake and referral procedures o Most successful youth have previous positive group care experience o Increase state reimbursement rate to enhance program	o Academics - alternative school, community college and public schools for GED o Vocational - trade schools, skills center, private and public employment programs, and private sector for job placement o Networking - Juvenile Court, Planned Parenthood, civic leaders, and public health clinics
Friends of Youth "Talbott House" Ron Tarnow 8080 169th N.E. Redmond, WA 98052 206/881-3396 206/228-5775	o Private social service and child care agency o Group home with life skills training component	o Based on state's need assessment began coed group home as emancipation program	o Youth ages 15-19, most over 16 o Referrals from DSHS and agency o Partially funded by United Way	o Agency designed life skills curriculum which includes relationships, use of phone, cooking, shopping, etc. and is done through weekly group o Require full-time education or vocational training with funds for special needs, e.g., tuition o Emphasis on employability, e.g., personal appearance o Built-in savings plan o Volunteers for life skills, recreation and fund raising o Attempt to supervise transition to independent living arrangement o Attempt to involve family	o State financial reimbursement rate insufficient to cover cost o Maintaining youth in program o Problems of working with emotionally disturbed population, e.g., drug/alcohol abuse	o Identifying appropriate education program to meet individual need o Progress to achieve specific goal increases self-esteem o Integration of youth into community, e.g. athletic teams, local stores, neighbors o Family atmosphere of program reflects realistic environment	o Need money to start program, e.g., funds from grant, county or state o Licensing - state may restrict population o Locate in town setting with access to resources, e.g., bus routes	o Church groups o YMCA o Boy's Club o School district o Transit system o Local businesses o Any "normal" people use

GROUP HOMES AND RESIDENTIAL TREATMENT CENTERS WHICH INCORPORATE SKILLS TRAINING AND EXPERIENTIAL LEARNING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Community Schools Inc. P.O. Box 555 Camden, ME 04843 207/236-3000 Emanuel Pariser and Dora Lievon	o Private o Residential program with experiential life skills training	o Need identified for specialized education program for high school dropouts	o 16-20 year old high school dropouts	o Basic skills training through experiential living situation o Residents receive diplomas upon completion of 6 month course of studies o Residents must work during day and evening hours structured for individual tutoring and group counseling o Required camping trip once a month				
				contacts			to enhance program	
Jefferson Hall Doug Parro, Director Bud Kueche, Consult. Colorado	o Group home with life skills training	o Began as a shelter care facility in 1969. Became more specialized and licensed in 1975 and began contracting with Department of Institutions (DOI) and Department of Social Services (DSS)	o 16-21 year old youth from DOI and DSS o Approximately 50% of referrals come from mental hospitals o Youth screened -- will not accept youth with thought disorders, violent/assaultive incidents, youth who would be felons if charged as adults	o 12 beds, co-ed facility o Youth must stay minimum of 90 days -- average 6-8 months o GED instructor comes in once a week o Structured group activities during evening - Emancipation issues - Decision making - House maintenance issues - Personal, emotional issues o Level system to add structure -- curfew times loosen as move up the levels o Try to supply youth with structure needed in self-discipline	o DSS does not put high priority on independent living programs o Problems for youth include - Job market is not open to them - Housing is difficult for youth to find - Youth not always able to understand what independent living will involve	o Specific goals for emancipation - $1,000 savings - H.S. diploma/GED - 10-12 weeks stable job - Approved of independent living plan - Any conflict with legal system must be resolved o Follow up studies of youth discharged showed that more than 2/3 had not been in trouble with the law	o Try to be like a "responsible family" rather than an institution o Board of Directors comprised of community members to help with fund raising and accessing community resources o Do not treat counselors as child care workers -- allow them to have ownership in the program	o Employment services o Alcoholics Anonymous o Mental health centers o Arranged for bus passes and purchasing groceries on credit

DIRECTORY OF PROGRAMS

APARTMENT LIVING WITH VARYING DEGREES OF SUPERVISION

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Iona R. Whipper Home, Inc. Transitional Apartment Program (TAP) Joan Hurley 2000 Channing St, SE Washington, DC 20018 202/269-0347	o Private, nonprofit funded by United Way o Apartment living	o Identified gap in transitional services for older youth at point of emancipation o Working with the DHS	o Female youth age 18-21 who are exiting to independent living	o Preparing youth in independent living skills through use of curriculum o Continued support during supervised and unsupervised apartment living phases o Employability skills training	o Transitioning youth from total dependency to total independence in limited time frame o Problems of self-esteem created by foster care and court systems o Funding resources o Zoning and licensing regulations o Jobs for black teens o Community support is lacking o Foster care children are 3-4 years behind academically	o Repeated life skills training o Experiential learning of economic reality o Assisting youth to overcome fear of "next step" through preparation and support	o Assess type of client to be served to recognize their limitations and potential strengths o Involve multiple levels of system in program development phase o Start preparation early	
High Frontier CBC Paul R. Young 3536 Marquita Drive Ft. Worth, TX 76116 817/244-3009	o Private child welfare agency o Apartment living with staff in complex	o Agency created service as continuum for youth completing structured residential program as youth lack viable alternatives	o Youth ages 16-18 o Referrals from DHR and Texas Youth Commission	o Youth maintain 6 apartments with M.A. level staff in same complex for supervision o Experiential life skills, e.g., shopping, group meals, recreation o Youth pay % of earnings to "trust fund" for rent o "Modified Positive Peer Culture" and twice weekly group meetings o Aftercare through individual and group sessions o Licensed for 13 youth	o Transition from isolated (ranch) program to urban setting, e.g., drugs o Program not yet at full capacity, e.g., youth living in unit alone causes loneliness	o Program integrates total life needs o Ability of youth to live independently and function in society o "Modified Positive Peer Culture" therapy model o Group process - youth must be able to use peer criticism and positive pressure	o Having staff who are able to work together thus limiting turnover o Be patient and learn as program develops o Ranch program gives consistency to continuum	o Consulting psychologist o Sponsor families o Some staff-sharing from Ft. Davis facility

APARTMENT LIVING WITH VARYING DEGREES OF SUPERVISION (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Hope Center for Youth David Windship 4115 Yoakum Houston, TX 77006 713/526-5561	o Private o Apartment living with staff in complex	o Agency has mandate to develop programs to serve continuum of care needs and fill service gaps	o Youth ages 16-17 who lack family resources o Referrals from DHR	o Experiential life skills through maintenance of facility with staff in building and supervising as needed o Allowance to meet basic needs, may increase with demonstrated ability to manage resources o Level system of increasing privileges while decreasing supervision o Capacity for 12 youth	o Referral agency reluctant to accept concept of experiential learning with emphasis on work not therapy o Day to day need for clarity of structure/rules, e.g., point system, rule violations, security and drugs o Allowing independence within structure	o Experience based learning with structure to prevent failure o Demonstrated flexibility of program, e.g., from single sex to coed o Individual apartment arrangement o Availability of live-in staff as needed o Education program with built-in incentives o Wide range population, e.g., borderline to mature	o Identify regional differences in access to resources, e.g., jobs o Apartment setting as viable facility o Learn from other programs - write everything down, target population, be flexible to change, set goals and objectives, identify therapy model and staff, check with referral sources	o Anything and everything available in community
Salvation Army Home for Girls Mrs. Marna Watson 2802 W. Ashby San Antonio, TX 78201 512/732-8182	o Private child welfare agency o Dormitory facility with experiential life skills training	o Agency identified need for transitional living experience between short-term care facility and independence o Sent survey to probation departments to determine need o Borrowed ideas from Hope Center program	o Females ages 16-18 o Most referrals from juvenile justice system	o Youth manage dorm facility under supervision o Life skills curriculum o Community programs for employment training o On grounds school or GED prep classes o Volunteer advisor through probation department program o Assist with transition to own apartment, e.g., provide dishes o Twice weekly group counseling plus individual o Emphasis on reaching goals not changing behavior	o Need to increase structure due to youth behavior, e.g, drugs, runaways o Establishing community relationships to allow effective use of program	o Reaching goals, i.e. visible achievement o GED program o Vocational training - all enrolled have completed program o Obtaining employment	o Identify community need o Define program objectives o Determine needs of population o Visit other programs	o Planned Parenthood o Community college, e.g., testing, GED o Goodwill and JTPA for employment training o Businesses o Volunteers through probation dept. o Probation and parole o Dental clinic o Reduced rate medical services, i.e., clinics o Salvation Army resources

APARTMENT LIVING WITH VARYING DEGREES OF SUPERVISION (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
LUK, Inc. "Transition to Independent Living Unit" Tom Hall 99 Day Street Fitchburg, MA 01420 617/632-7374	o Private, multi-service agency, includes residential child care o Supervised apartment facility with life skills training	o Agency submitted grant proposal and project was approved, later expanded	o Youth ages 16-21 o Referrals from DSS	o Youth maintain apartment facility under supervision o Individual and group skill development, with weekly community speaker, e.g., used car salesperson o Must be involved in full-time day activity o 4 tier level system from fully supervised activities to full self-responsibility o Weekly stipend based on youth's earnings o Forced savings plan o Aftercare for 1 year o 2 apartments with 3-4 youth per unit	o Maintaining consistent flow of referrals o Some youth not able/motivated to maintain day activity, e.g., getting up in the morning o Problems associated with "throwaway" youth, e.g., emotional issues of having no family	o Staff as key element: approach to program objectives; consistent supervision; establishing relationships o Amount of rules is intermediate level of structure between foster care and transition to independence o Living with peers allows youth to learn relationship and cooperation skills o Levels system gives sense of movement	o Meet with people running programs to learn what model fits o Identify beliefs, goals and objectives within funding constraints o Develop living arrangement similar to what youth will be able to afford	o Community representatives as speakers o GED programs o Mental health o Hospital, physicians o Agency resources, e.g., counseling o Welfare department o Public schools
Franklin County DIAL/SELF "Transition to Independent Living" Joyce Thompson 15 Bank Row P.O. Box 184 Greenfield, MA 01302	o Private o Apartment living with life skills training	o Agency realized youth ages 16-21 lacked housing resources o Program developed for CHINS	o Youth ages 16-21 o Referrals through DSS o Apartments funded through foster care dollars, housing authority subsidizes rent, Community Development Corp. owns buliding and DSS contracts for counseling	o Youth maintain 4 2-bedroom apartments without 24 hour supervision o Youth must maintain full day program o 10 week life skills program with flexible use of materials o Forced savings plan o Subsidy for food and rent o Bi-weekly support group o Individual counseling and advocacy	o Maintaining referrals of youth ready to participate in program o Roommate conflicts - must negotiate and contract o Lack staff to enforce many rules, need to deal with violations o Keeping program full o Finding alternatives for youth not working out in program, e.g. temporary foster home for suspensions	o Ability to work with appropriate youth, e.g. those with a goal o Commitment and involvement of staff, e.g. use of judgment o Program creates sense of safeness, e.g., youth feel secure and wanted in program o Apartment setting is like family unit	o Need lots of stamina o Read literature, e.g., "Reactive Depression" o Need structure, e.g., curfew o Define referral criteria o Need to plan for youth not working out o Combine education with employment o Realize this is "saddest" group as reality sets in, e.g., lack family resources	o Community Development Corp., e.g., owns and rehabilitated building o DSS o Housing Authority o Local college o Family planning o Employers o Encourage family contact o As many as can to teach you to depend on community

APARTMENT LIVING WITH VARYING DEGREES OF SUPERVISION (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Harbor Schools "Community Life Program" Mike Corbett 11 Market Square Newberryport, MA 01950 617/462-3151	o Multi-service, residential child care agency o Apartment living	o Developed program through experience with a New England state's service model o Independent living as component of agency service continuum	o Youth ages 16-18 and older, if funding available o DSS referrals to to agency programs	o 4 types of living arrangements: 1. LIVING PARTNER - 6-9 months, youth lives with yougn adult to learn tasks of living on own 2. ROOMING HOUSE - youth resides alone, agency has relationship with management 3. OPEN COMMUNITY - youth lives in apartment setting 4. COMMUNITY BASED COUNSELJNG - direct payment to youth, supportive services o Must maintain full day activity, e.g., work and GED o Sliding scale subsidy for living expenses based on level and ability to earn o 6-8 hours weekly of advocacy, counseling, outreach, crisis intervention, and tracking o Weekly "youth group" meets o Celebrations, rites of passage and socializing o Active followup as surrogate family, e.g., invite to holidays and activities o Team approach, includes family systems consultant and family therapy	o Community awareness of what program is doing and why o Drug/alcohol dependency, e.g., experimentation, addiction, breaking family cycle o Program flexibility to meet individual need	o Develop larger network of resources for youth to achieve success, e.g., people to turn to o Providing support network of training, supervision and back-up for staff to make independent decisions o Inclusion of community relations to gain support for program, e.g., landlords, churches, police, judges, civic groups	o Begin with agency board to develop sense of need for program in organization and to plan as mutual process o Begin conservatively o Hire consultant with experience o Recognize program will have stages of development	o Whatever is available as each youth has different needs o DSS o State and local welfare departments o Landlords o Rent subsidy

DIRECTORY OF PROGRAMS

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Jones & Associates Dr. James Jones 1454 Corcin St., N.W. Washington, DC 20009 202/462-1117 "Apartment Lifestyle Living"	o Private o Skills training to apartment living	o In response to Mayor's Task Force on transition of foster care youth to emancipation without preparation o Reviewed literature and found that little was being done to address issue	o Foster care youth ages 17 to 21	o Phase I - life skills training in 13 areas under supervision o Phase II - 90 day pre-emancipation in semi-supervised apartment o Phase III - full emancipation o Behavior modification approach with allowance based on task performance o Program is 90% experiential o Financial support for college o Group and individual therapy o Writing report of research findings o Program has served 40 youth, 10 are in college	o Lack of funds to provide youth with apartment start-up money o Resistence of system to new service approach o Amount of payment for youth's essential needs (e.g., clothing allowance) to be able to successfully compete in the community	o City has been cooperative with service o Motivation - service provides alternative for youth exiting foster care (e.g., college) thus lifting aspirations and reducing stigma o Technical skills of pre-emancipation phase o Point system to modify behavior o Location of facility off main site	o Review literature and efforts of others before beginning o Planning phase to determine needs of population o Hire staff with education and guidance experience, staff must give youth responsibility and experience, not baby-sitting o Use point system fairly o Access grants and loans for college o Approach must be flexible	o Planned Parenthood o Resources for start-up supplies o Big Brothers o Counseling services o Any available in community appropriate to youth's need
D.H.R.S. Lee County Mental Health Center Vern Langford Florida	o Public child welfare agency o Combination skills training and independent living situation	o Dept. developed for youth not appropriate for regular foster home placement	o Foster care youth ages 16-19 who can't live at home o Affiliation with youth shelter facility	o 12-18 month program of 4 levels with emphasis on earning money and savings o Use of independent living skills curriculum o Self-esteem building through communication and leadership skill development and evaluation of personal goals o Last level includes independent living situation				

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
The Children's Home, Inc. Jon Parsons 10909 Old Memorial Highway Tampa, FL 33615 813/855-4435	o Private, nonprofit o Residential treatment program which incorporates independent living skills training and apartment living	o Youth growing up in residential treatment center lack family resources o Researched other independent living programs o Were able to be more flexible as agency is private	o Youths over age 14 o Independent apartments for youth over 17 o Support and after care until 20 if needed o COED living	o Experiential life skills training begins early, e.g., employment at age 14 o Vocational skills training o Cottage for pre-independence preparation then apartment subsidized by agency until youth is self-sufficient o Casework services are essential to support youth o Forced savings program o Career exploration services provided	o Emancipated youth are lonely and easily influenced by negative peers o Maintaining employment o Others take advantage of youth from sheltered environment, e.g., involvement with drugs, roommates	o Education Component - GED, vocational skills needed for future o Youth must prove ability to earn privileges o Agency contacts for jobs	o Know target population and don't mix (e.g., foster care with delinquent youth) o Emphasize "tight line" approach - youth must prove ability o 18 not magic age, keep to 21 as needed o Start preparation early o Program must be flexible and able to change o Program must be experiential	o Employers who are donors o Vocational schools o GED programs o Volunteers o Churches and community recreation
Youth Resources Center, Inc. Debra Chaplin "Starting Over" 4109 Queensbury Road Hyattsville, MD 20782 301/779-1946	o Private agency o Combination group home with skills training and supervised apartment living		o Youth ages 16 1/2 to 18 o Referrals from county juvenile services and state social services	o 9-12 month program in learning environment o 3 week screening phase followed by 4 levels Levels 1&2 - life skills training and employment Level 3 - transition to own apartment Level 4 - aftercare o Encourage youth to make responsible choices with clear consequences for violations of program o Capacity to serve 8 youth	o Identifying adequate funding resources o Program is new and still developing o Regression as change levels, responsibility increase is feared o Funds limit number of staff, e.g., burnout o The neediness of youth is draining on staff and resources	o Program allows youth to experience realities of independence and life choices o Opportunity to learn to live with others o Peer support o Youth have positive experiences with adults	o Identify secure funding resources and maintain adequate staff o Specify target population o Identify community resources o Program should "fit" within community environment	o Fire Department o Insurance companies o Bank representatives o Mental health resources, e.g., Detox Units

DIRECTORY OF PROGRAMS

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
New England Home for Little Wanderers Norwood Adolescent Model Mary Jo Cook 81 Walpole St. Norwood, MA 02062	o Private child welfare agency o Combination program of life skills training to apartment living	o Combined effort of agency and DSS program development, agency identified need and solicited for a contract	o Males and females ages 16-20 o Program funded by state, and run by private agency	o 4 component programs to learn skills 1) youth live in staffed apartment for up to 1 year 2) youth live in semi-supervised apartment subsidized for 6 months 3) life skills taught in own or foster home 4) aftercare services for 6 months o Counseling through child care and social work staff	o Appropriateness of referrals to program - youth must be able to function in community, with supervision o Locating housing - o Neighbors and community may resist facility in area o Zoning regulations	o Ability to be flexible in modifying program and individualizing support services to client ability o Support for agency and DSS to work together o Program is voluntary, youth must agree to participate	o Communication with contract source to identify population and other available services before begin o Verify zoning and agency reputation in community	o Public school system o Counseling center o Self-help groups o Town civic center for athletics o Local companies for employment o Hospital ambulatory care unit, e.g. response to "neediness" of youth
United Methodist Home for Children Ed Odom 110 N. Elm Webster Grove, MO 63119	o Private child care agency o Combination life skills training to apartment living	o Identification of youth ages 17-21 as most neglected people in society o Service gap as youth released without support fail as are not prepared to earn a living and lack alternatives to institutional care o Wrote grant proposal and was funded o Learned of idea from 1972 experience with Dr. Jerome Miller in Illinois	o Male and female youth ages 17-21 o Will accept teen parents o Referrals from DFS, school districts and private agencies (e.g., shelters)	o Financial and structured support to develop into productive adult o Preparation phase begins in 9th grade with job skills o Must save $500-1000 before enter independent living phase o Must be in high school or have education plan (GED) o Independent apartment subsidy of $300 for 6 months, decrease by $50 per month beginning 7th month with weekly, phone and emergency staff support	o Finding apartments to rent by minors, e.g. cosigner, landlord blacklist o Youths are lonely and become easy targets to be used, e.g., by helping a runaway	o Program gives hope to desperate, e.g., provides alternative to street life o Deter youth from criminal system o Help youth transition from institution to independence with support and skills but less rigid structure o "Safety net" allows youth to make errors without being disasters o Opportunity for youth to learn from mistakes	o Diligence of effort to begin program to fill desperate need o Talk with others who have experience in effort to avoid pitfalls o All youth need to learn life skills	o Big Brother program o Community volunteers o JTPA o Summer youth employment o Public school for GED

DIRECTORY OF PROGRAMS

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Martin de Porre Manor Villa Manor Bill Donely 2045 E. Grand St. Louis, MO 63107 314/837-0513	o Private, residential child care agency with apartment living component	o Agency identified need for services to transition youth from institutional setting to independence as alternative to discharge o Agency surveyed youth to determine service and program needs	o Male youth ages 16 to 21 o Referrals from social service providers to agency central office for intake	o Youth maintain 3 story facility with supervision o 6 to 12 month program includes series of 26 life skills workshops, weekly house meetings, full or part-time employment, savings program and weekly payment to program o Use of community volunteers for visiting resource o Program serves 6 youth	o Ability of youth to adjust to freedom of program after institutional/home setting o Need to have time limits for youth to complete activities, e.g., chores	o Addition of time limits for completion of activities o Must maintain employment to remain in program o Clarification of limits	o Establish screening criteria for clients as personal issues of youth need to be addressed before able to adjust to program even though may need service	o JTPA o Job Corps o Local business people for skills workshops, e.g., bank, insurance o Medical and dental clinics o Public transportation
The Resource Center Crossroads Programs, Inc. "Transitional Living Component" Kathy Brown P.O. Box 98 Burlington, NJ 08016 609/386-4400	o Private emergency shelter service o Combination life skills training and apartment living	o Agency identified need for long term housing for homeless youth	o Homeless youth ages 16-18 o Referrals from DYFS and probation department	o Life skills training before enter "Graduate" program of independent apartment with supervision and informal aftercare o Agency has co-programs for vocational and educational skills o Are developing volunteer advisor program	o Funding by person rather than slot caused losses	o Concrete services to meet future life needs, e.g., GED, driver's license, vocational	o Establish criteria to screen and include in contract with DSS o Identify stable funding resource	o Probation dept. o DYFS o Public assistance o WIN o Volunteers, e.g., R.S.V.P. o Local agency workers to generate referrals o United Way o Garden State Network Coalition

DIRECTORY OF PROGRAMS

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Association for the Advancement of the Mentally Handicapped (AAMH) Roy Johnson Marshall Bord 60 Prince Street Elizabeth, NJ 07208 201/354-3040	o Private, multi-service agency o Combination life skills training and supervised apartment living	o Agency began program for aging-out foster care youth to fill service gap o Model adapted from services provided to developmentally disabled and multiply handicapped population	o Youth ages 17-21 o Has been for "difficult" youth o Program has been expanded to reach broader range of youth in 1986 o Referrals from DYFS	o Comprehensive services are provided to each young person o Life skills training through experience of living in apartment with 24 hour access to supervision o Vocational training leading to employment, service works with employer as community support person o Currently serves 60 youth o Human relations and sex education o Social/recreational program o Full medical/dental care	o Majority of youth have been in some form of out of home placement and come to program unprepared for independent living o Youth's emotional disabilities may affect their ability to work and hold jobs o Referrals of "mixed" client group o Lack of alternatives for those unable to use program. Funding has been obtained to conduct statewide needs assessment to be used in developing more programs o Legal status makes program voluntary for youth over age 18	o Opportunity to see young people growing, having alternatives o Youth living independently and assuming responsibility for self o Youth returning to school and thinking in terms of career/formal training programs o Cooperative relationships with DYFS, MH, DD and legislature o Positive press coverage	o Recognize age out population includes range of needs - need for target group, screening criteria and compatibility o Adequate staff to monitor activity of youth and to provide direct contact o May need to develop group home as transitional phase before apartment living which may need awareness in community, e.g., zoning o Ensure continuity of care at age 21 for those who cannot become fully independent	o Agency has federally funded job placement service o Foster Parent Assc. o Key business and community persons o Vocational rehab o YMCA o Medical clinics o Day treatment programs, e.g., M.H. o Public schools o "Any resource that exists"
Fair Play Wilderness Camp "Vocational Program" Mark Yoder Rt. 2, Box 213-A Westminster, SC 29693 803/972-9311	o Private, residential child care agency o Combination of life skills training, group home and experiential independent living	o Outgrowth of Wilderness Camp Program, after stabilize behavior many youth lack family resource	o Male youth ages 14-21 from in-house program o Majority from DSS referrals	o Teach vocational and life skills through academic and experiential learning o Youth plan menus, do meal prep 2 days per week o Develop "visiting families" through Wilderness Program o Transition from program to unsupervised living with aftercare	o Transition from rigid atmosphere to freedom of less structured program o Motivating youth to assume self-responsibility o Obtaining financing to initiate program	o Teach ability to accept self-responsibility, to live as a family, and to learn socialization skills	o Must have desire to help youth without receiving a lot of monetary compensation o Establish community support for service o Social support base, e.g., church affiliation	o Public schools o Sectarian agency o DSS o Mental Health Dept. o Local community, e.g., jobs o Community volunteers are houseparents

DIRECTORY OF PROGRAMS

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Oasis Center, Inc. Pat Hutchison P.O. Box 121648 Nashville, TN 37212 615/329-8036	o Private non-profit child care agency o Combination program with life skills training and apartment living	o Agency identified concern for youth who are "pushed out" or "dumped" from system o Applied for grant from DHHS	o Youth ages 17-19 who are leaving child welfare system without needed skills	o Levels system from foster home to supervised support to own apartment o Basic skill development curriculum for life skills o Job through progression from skill building to job club to placement to followup support o Forced savings program o "1 on 1 Buddy Match" for community role model o Support group and individual counseling	o System does not allow youth to live independently or get GED until 18 o Funding to pay foster families o Youth in care are not "strong" and fall into bad patterns, e.g., drugs o Reduction in supervision and accountability o How foster family views youth, e.g., goal is to promote independence not to protect	o Program to fill major gaps as there is large need for service o Success in impacting policy o Increase awareness of service need o Opportunity to design new treatment approach, e.g., skills manual	o Make careful community linkages for cooperation o Extensive start-up phase for planning o Train staff who are able to work with difficult youth o Establish screening criteria to limit diversity of population o Recognize multiple needs of youth	o Mental health services o DHS o Court o Health clinic o Council of Community Services o University for educational assessments and legal clinic o Planned Parenthood
Haven House, Inc. "Preparation for Independent Living" John Sullivan 401 E. Whittacker Mill Road Raleigh, NC 27608 919/755-6368	o Private, residential child care agency o Combination of life skills training and supervised apartment living	o Program began with 1 apartment as agency identified youth experiencing loss of progress after leaving teaching family group home and returning to own home o Developed to provide continuum of care	o Emotionally disturbed male youth ages 16-17 o Developed with funds from Kiwanis, United Way, county and state o Referrals from DSS, Juvenile Court, schools, parents, youth, mental health, law enforcement and Haven House	o 18-24 month program based on a teaching plan of 4 levels, with increasing responsibility to pay own cost as progress, with youth living in supervised apartment setting o Life skills through workbook o Participate in school and part-time employment or have full-time job, if not school o Use components of reality therapy and teaching family model o Assist in transition to own apartment or family o Developing volunteer program	o Failure of youth to cooperate with structure of program, e.g., accepting responsibility, working, curfew	o Each youth is seen as a success o Individual success varies, e.g., achievement on social skills or job skills	o Pros and cons of apartment program PROS - Youth have own space to experientially learn through trial and error CONS - lack of group living may lead youth to withdraw and isolate self; youth need to adjust to freedom of minimal supervision RECOMMEND - to continue working with other Preparation for Independent Living programs to establish an independent living network statewide	o Juvenile Court o DSS o Mental health o Kiwanis o State employment agency o Vocational rehab o Community, e.g., youth enterprises, employers, YMCA, Red Cross, police dept., newspapers, churches, state parks

DIRECTORY OF PROGRAMS

RESIDENTIAL PROGRAMS WHICH PROVIDE A CONTINUUM OF SERVICES FROM SKILLS TRAINING TO APARTMENT LIVING (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Methodist Children's Home "Transition Program" Carolyn Mixon 2001 Filmore Little Rock, AR 72201 501/661-0720	o Private o Group homes which incorporate life skills training and apartment living	o Agency identified need as youth were exiting unprepared for independence and were returning to care	o Over age 16 1/2 o Support services to age 20	o Life skills training in 4 key components: jobs, education, relationships and home living o 3 levels from skills training to transitional apartments with increasing privileges at each level o Behavior modification point system for structure o Subsidize transition to apartment for 3 months o Family visiting resource program, e.g., for Christmas o Group and individual counseling o Serves 5 youth per group home	o On reaching age 18 youth may change plans and not stay to complete program o Need for experience based learning	o Flexibility to accommodate individual in areas of skill development	o Need to develop support system in local area, e.g., jobs, community services, resources o Location in rural area may limit access to jobs and living arrangement resources	o JTPA o Alcohol abuse groups o Counseling and mental health services o Making It On Your Own, life skills workbook
Evangelical Children's Home "Stepping Stone" Bob Bauer 8240 St. Charles Rock Road St. Louis, MO 63114 314/427-3755	o Private o Residential program, combination of life skills and experiential independent living	o Recognized youth ages 17-21 were "floating around" without sufficient motivation, skills and education for successful independence o As resource for agency clients after age 18	o Agency clients ages 17-21 o In last year had 119 referrals for 15 slots	o Youth responsible for maintenance of residence under supervision of house parent o Youth pay $100 per month to agency of volunteers for 30 hours of service o Education and/or employment must be maintained o Must save 40-60% of earnings o Transition to apartment once savings reach $2000 o Weekly group meetings for aftercare	o Dependent on church and community for funding which limits behavior tolerated on campus (e.g., drugs, sex), youth must pledge to not engage in such behavior	o Program stays with youth to provide parenting and structure youth need to finish growth process o 7 youth are in college o Aftercare group available as long as youth cares to participate	o Have sufficient funds to "do it right", e.g. staff and therapy o Define limits of program in terms of population and structure o Accept role of "parent" and hazards related to parenting youth o Facility in community to be more tolerant and flexible in expectations	o JTPA o Public school, e.g. GED technical training o Any community groups o Negotiating with corporation to sponsor youth

DIRECTORY OF PROGRAMS

OTHER MODELS (E.G., DROP-IN CENTERS, ADOLESCENT UNITS)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Center for Youth Services **Joe Rollo** **921 Pennsylvania Avenue, S.E.** **Washington, DC 20003** **202/543-5707**	o Private, funded by donation, e.g., United Way o Drop-in center	o Several individuals identified service gap and developed comprehensive single site service based on the model of the Door in N.Y.C.	o All city youth ages 12-24	o Systems approach with training in employability, education and avocations o Services include medical intervention, mental health counseling and licensed child day care o 4 day assessment phase to develop youth's "Action Plan": Day 1 - external vs. internal forces Day 2 - values clarification Day 3 - success vs. barriers Day 4 - contracting and testing to determine need for remedial services o Serves peak of 40-50 youth per day	o Lack of funds to meet all needs of youth o Maintaining youth involvement (e.g., school holidays are seen as program holidays), the 4 day assessment is designed to increase youth commitment o Need for housing resources as alternatives to shelters and negative family situations	o Medical services are tangible and require less commitment from youth o Education component is popular but requires effort to complete as many youth read at a low level o Program is able to rely extensively on the services of volunteers o Cases are not officially "closed"	o Identify funding to maintain private, nonprofit organization o Adequate staff to maintain response to referrals o Realize youth in crisis will use most time and may take resources from non-crisis clients	o Shelter homes o Churches o Public schools o Court system o Center for Community Nonviolence o Resources for independent living
Montgomery County DSS-Adolescent Unit **James Shannon** **5630 Fishers Lane** **Rockville, MD 20852** **301/468-4293**	o Public child welfare agency o Adolescent unit	o Reorganization of service delivery system to meet needs of older client population, divide services by function	o Adolescent youth is custody of DSS - e.g., youth in foster care, emergency shelter, independent living and teen parents	o Specialized caseloads to meet needs of adolescents o Staff member with sheltered caseload to provide independent living services on individual case basis	o Identifying personnel able to meet service needs of older youth o Access to community resources, e.g., housing	o Staff person with experience in providing independent living services o Division of unit by function rather than personnel		

OTHER MODELS (E.G., DROP-IN CENTERS, ADOLESCENT UNITS) (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
New England Transition to Independent Living Collaborative Nancy Jackson 14 Beacon St. #706 Boston, MA 02108 617/942-8555	o Consortium of independent living providers	o Revitalize earlier collaborative of service providers in state of Massachusetts	o Older adolescents	o 36 programs throughout New England, encompassing counseling, independent living programs and attached residential programs o Will be holding a regional conference, newsletter, legislative advocacy			Issues to be addressed: o Pregnant/parenting teens in programs o Appropriate referrals o Youth and Independent Living concept advocacy	o Massachusetts Committee for Children and Youth o State offices o Provider agencies
Ozone House Sandra Donow 608 N. Main Street Ann Arbor, MI 48104 313/662-2222	o Private volunteer agency providing runaway and family counseling services o Drop-in center	o Increasing numbers of homeless youth ages 16-18 strained agency ability to meet service needs, obtained federal grant	o Homeless youth ages 16-18 o Project funded by federal grant	o Support group for life skills seminars, run by volunteers and community guest speakers o Referrals for housing and employment o Stipend of $625 paid in gradually reduced amounts over 5 month period o Loan fund for security deposits	o Follow through in program by participants o Agency reliance on volunteers limits consistent documentation of services provided	o General positive effects of counseling services o Individual success stories	o Start with sufficient structure built into program o Think out paperwork requirements ahead o Patience is necessary, expectations should not be too high	o Network with other agencies for services o Public schools o Job training o DSS o Courts o Police o Program volunteers o Community speakers

DIRECTORY OF PROGRAMS

OTHER MODELS (E.G., DROP-IN CENTERS, ADOLESCENT UNITS) (Continued)

PROGRAM	TYPE OF PROVIDER	HOW DEVELOPED	TARGET POPULATION	RANGE OF SERVICES	PROBLEMS	SUCCESSES	RECOMMENDATIONS	RESOURCES USED
Hale Kipa, Inc. Sam Cox, Project Dir. 2006 McKinley St. Honolulu, HI 96822 808/955-6991	o Private, nonprofit organization o Independent Living Program with host home concept	o Hale Kipa Board Long Range Planning Committee identified need for Independent Living Program in 1980. Funding made available from local private foundation with in-kind contributions from Hale Kipa and Department of Social Services	o 16 1/2 to 18 year old youth referred by Department of Social Services and Housing and private agencies o First year program targeted 12 youth	o Placement in licensed independent living homes. These homes are specifically recruited and trained as independent living homes. o One individual counseling session per week o Group therapy/education sessions o Employment testing and training o Help youth to secure a job o "Living Skills" training o Help youth to explore and secure independent living arrangement				o Community agencies o United Way o Private funding sources o Department of Social Services

4. RESOURCE LISTING OF ARTICLES AND CURRICULA

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Emancipation Preparation Handbook. A workshop model with exercises for use by workers and workshop conductors. Available from: South Dakota Dept. of Social Services, Office of Children, Youth and Families, P. O. Box 1504, Sioux Falls, SD 57101.

Preparation For Independent Living, by Claire Schumann. A training module for foster parents. Available from: Eastern Region Training Center, 1511 Locust Street, St. Louis, MO 63103.

This Is Your Life, by Claire Schumann. A workbook for youth in emancipation or independent living programs. Available from: Eastern Region Training Center, 1511 Locust Street, St. Louis, MO 63103.

On Your Way To On Your Own, by Arlee Lemmon and Hildegarde Mauzerall. A workbook and resource book for youth preparing for emancipation. Available from: The Casey Family Plan, 5858 Emerald Street, Boise, ID 83704.

Handbook For Emancipation And Life Skills Program, by Deidre Schoen. A handbook to be utilized by youth preparing for emancipation. Available from: Shalom House, 2820 Vallejo, Denver, CO 80211.

Administering Independent Living Programs. A resource of reference materials to aid in administering independent living programs for people with disabilities. These materials are directly adoptable by youth service agencies. Available from: Institute for Information Studies, 200 Little Falls Street, Suite 104, Falls Church, VA 22046.

Independent Living Program Training Manual. Available from: Oasis House Outreach Program, Richmond, Virginia.

Independent Living Assessment Checklist. Available from: The Catholic Charities of the Archdiocese of New York, 1011 First Avenue, New York, NY 10022.

Independent Living Skills Curriculum. A model with exercises to be used by workers, foster parents, etc. Available from: Department of Social Services, John P. McCann, 40 N. Pearl Street, Albany, NY 12243.

Making It On Your Own, by Dorothy Ansell. A workbook for youth preparing for emancipation.

Guidebook to Making It On Your Own, by Dorothy Ansell. Instructions for workers, foster parents, etc., for using Making It On Your Own. Available from: School of Social Work, Virginia Commonwealth University, 1001 W. Franklin Street, Richmond, VA 23274.

Training Curriculum For Foster Parents. Available from: University of Tennessee, Office of Continuing Social Work Education, P. O. Box 90810, Nashville, TN 37209.

A How-To Book of Independent Living. A source book for adolescents to aid in their transition to independent living. Available from: Specturm, Inc., 18 Monroe Street, Burlington, VT 05401.

Leader Manual for Social Skills Training, by Craig Winston LeCray, Ph.D. Exercises for teaching social skills. Available from: School of Social Work, Arizona State University, Tempe, AZ 85287.

Independent Living Training Curriculum. Available from: Elan Home, P. O. Box 1157, Elon College, NC 27244.

Loosing Up: Getting rid of those uptight feelings;
Finding Solutions: Learning to deal with life's problems and decisions;
Making Friends: With others and yourself; and
Why Is It Always Me? (Film). Available from: Life Skills Training Associates, Inc., P. O. Box 48133, Chicago, IL 60648.

THE WORK SERIES: Taxes; Where to Get Help; How I Should Act at Work; Payroll Deductions and Company Benefits; Work Rules; How to Find a Job; and Getting to Work.

THE MONEY SERIES: Buying a House; How to Buy Food; Finding a Place to Live; How to Budget Your Money; Banking; Insurance; and How to Borrow Money.

THE HEALTH SERIES: Going to the Doctor; and How to Buy and Use Medicine. All available from: Hopewell Books, Inc., 1670 Starbridge Drive, Rd #1, Sewickley, PA 15143.

WRITTEN DESCRIPTIONS OF PROGRAM MODELS

Griffin, William V. Independent Living Strategies. A Program to Prepare Adolescents for Their Exit from Foster or Group Care. National Child Welfare Leadership Center, May, 1985.

Linsenmeyer, Debra. On Your Own. An Independence Planning Program for Youth. Baltimore County Department of Social Services.

Newman, Murray A., Ph.D. Hope Center for Youth Evaluation Report. The Office of Research, Demonstration and Evaluation, The Texas Department of Human Resources.

Walters, Ronald J. History of Children's Service, Inc. Children's Services, Inc., 311 South Juniper Street, Philadelphia, PA 19107.

5. STATE POLICIES

Florida

CHAPTER 4

SERVICES TO ADOLESCENT FOSTER CHILDREN

4-1. Theoretical Basis. The foster care population has become an increasingly older group of children. This change necessitates looking at the special needs of that age group in our substitute care program. Adolescence is a time of preparation for the future. Adolescence for many foster children is a time of confusion and self-doubt brought on by the circumstances of their being in foster care. Whether they are in care from deprivation or conflict; whether they have been in for ten years or ten days, they present problems requiring solutions that are not always the same solutions we have used in working with younger children in foster care. As they begin their adjustment to the adult world, foster parents and foster care staff must help the teenage foster child cope with identity crises, vocational training and job searches, household and money management issues and many other aspects of the growing up process. This chapter has as its purpose the singling out of adolescence as a time of special concern for staff and foster parents. This is accomplished by highlighting the various laws, rules, regulations and programs that focus on adolescents and young adults.

4-2. Independent Living.

a. Purpose. This section establishes policies and procedures regarding the implementation of the placement option of independent living made available by the 1984 Legislature. An amendment to the statute allows the department or licensed child placing agencies to place a 16 or 17 year old youth "...in his own unlicensed residence, or in the unlicensed residence of an adult who has no supervisory responsibility for the child, provided that the department or licensed child-placing agency retains responsibility for the child," Section 409.175(3)(e), F.S.

b. Scope. The policies and procedures established for this program apply to departmental foster care staff who have older foster children in their caseload who may be more appropriately placed outside family or group home settings. These policies and procedures have been developed to ensur that it will work best. It describes the case planning implications of this option, describes acceptable living arrangements and establishes standards for frequency of counselor/client contact necessary to assure that the department effectively maintains responsibility for the youth.

c. References. Section 409.175(3)(e), Florida Statutes.

d. Description of Program. The Independent Living Program is designed for foster children who are 16 years of age or older. Some youth who are not able to return to their family home as a result of reunification efforts made on their behalf are also unwilling or unable to make the emotional investment necessary to enter into a relationship with a new family, in a foster home or adoptive placement. These youth may not be willing to accept or be able to benefit from a group home or residential group care placement. For this group, whose major life task is to achieve self-sufficiency, an unlicensed setting may be an appropriate choice.

e. Eligibility Requirements When considering an application for the Independent Living Program, the following criteria must be used in deciding whether to approve the applicant for inclusion in the program:

(1) The youth must be at least 16 years of age;

(2) He must have been in the custody of the department for at least six months;

(3) We must have written approval from his parents, if they are available;

(4) The plan must have the approval of the courts;

(5) The youth must have an approved written plan for self-sufficiency which is achievable within 18 months;

(6) The youth must be able to contribute a minimum of $100 per month to his financial support through employment or a combination of earned and unearned income;

(7) The youth must have demonstrated during the previous six months in foster care an ability to handle independence as evinced by: responsible behavior during placement; maintenance of a dependable employment record; establishment of a savings program; and maintenance of regular attendance at a school or in a training program. (If during this six month period the youth has been convicted of a crime, or run away then he is not appropriate for independent living.) This six month testing period offers the youth who desires independence a relatively short period of time to demonstrate the behavior necessary for a successful independent living placement. A living arrangement sanctioned by the department and the courts and a financial subsidy can act as an incentive for those youth intent on getting out on their own to prove that they can act responsibly.

(8) Exceptions to these standards must be approved by the District Administrator, or his designated representative on a case by case basis.

f. Financial Maintenance. The budget for the Independent Living program is based on the amount an individual can earn working a 40 hour week at the minimum wage. If a young adult can learn to manage his basic living expenses at this level then he will be prepared to live independently. Minimum wage currently is set at $3.35 per hour. Assuming that an individual works a 40 hour week he can earn $134 per week or approximately $475 per month in take-home pay.

(1) Using this figure, and rounding up for convenience sake, the maximum cost of an individual's room, board, clothing, transportation, recreation, personal incidentals and medical insurance cannot exceed $475 per month.

(2) Each young adult wishing to be considered for the Independent Living program must have a monthly earned or unearned income of $100 or more. (We will discount this amount, giving the individual an incentive to earn more than the minimum wage if he or she is able to do so.) Every dollar over and above the first $100 of income (earned or unearned) will be subtracted at a rate of .50 per dollar from $475.00 to determine the amount of the Independent Living grant. The amount of the grant will be refigured monthly. Deductions will be made for the month following the increase in income, rather than during the first month in which the increase occurs, in order to assure that the individual has advance warning in regard to any decreases in our support of their expenses.

(3) The Independent Living grant will be made out directly to the youth. Funds for the grants should be drawn directly from the district's residential group care budget or from the foster care budget, depending on which program the young adult was in at the point that the decision was made to approve his or her application for Independent Living. The check may be mailed to the youth's address or it may be mailed to the child welfare office so the youth who comes to the office to pick up his check can report to his counselor at the same time.

g. Budgeting. The cost of the individual's rent, food, clothing, transportation, recreational expenses, etc., must not exceed the budgeted amount of $475 per month. Each individual being considered for the program is expected to work out a budget which takes this amount into consideration. Suitable lodging must be located, funds for utility deposits, phone deposits, etc., must be put aside in preparation for the child's movement into the Independent Living program. If the child has chosen a setting where utilities are included in the cost of the rental unit (such as a YMCA or YWCA placement or a rented room in a private home) they may move into the program sooner, but under no circumstances should the department pay these deposits for the young adult. It is important that the candidate for the program face life as he will find it. This does not prohibit helping the youth access any community resources that might assist in arranging for these utility deposits.

h. Medical Care. Youth in the Independent Living program will not be eligible for Medicaid, nor will they be eligible for AFDC-FC since they are not in licensed settings. Medical expenses for these youth will have to be borne by the foster care budget, out of general revenue. If the youth is able to secure group or individual health insurance through his employment, he should be encouraged to do so.

i. Maintenance Fee Collection. Earned and unearned income paid to the youth in the Independent Living program is not subject to maintenance fee collection since the payments are an integral part of the case plan of eventual independence. For further information on this exemption to the maintenance fee collection process see rule 10M-6 of the Administrative Code, and HRSM 55-7, Fee Assessment and Collection.

j. Selection of Living Arrangement.

(1) Independent living residences shall meet the following minimum standards:

(a) Be located so as to provide reasonably convenient access to schools, places of employment or services required by the youth;

(b) Comply with applicable state and local zoning; fire, sanitary and safety regulations (unless the counselor or youth observes violations the assumption will be that the residence meets standards);

(c) Be reasonably priced so as to fit within the youth's budget;

(d) Provide a setting which is conducive to the development of healthy social relationships;

(e) Be, in the evaluation of the HRS counselor, a suitable living arrangement for starting the youth on the way to independence.

(2) Examples of such living arrangements may include boarding houses, rooms for rent in single family dwellings, apartments or residences for men and women operated by church or civic groups. It will be the responsibility of the youth to locate resources, and to identify places for consideration. The counselor retains the right to help the youth choose the right setting.

(3) An important piece of this decision making process is whether the young person should have roommates. Any decision should be based on how easily the youth is manipulated by his peers, on his degree of personal responsibility, or consideration of any tendency to become withdrawn when left alone, and on the youth's ability to afford to live alone financially. The

counselor should use the youth's behavior in previous placements, in school, and in his work setting to help make this decision.

(4) To prevent the independent living program from losing community support, gaining a poor public image and possibly losing statutory authority to even have a program, the youth in independent living must be informed of the consequences of behavior that violates the law or community standards. Along with obvious violations of the law typically associated with adolescence such as drug use and alcohol use, cohabitation is prohibited, as well as employment involving dangerous or illegal activities. The participant in the independent living program has an additional responsibility over those of his peers. He is not only responsible to himself and his family, but also to the department and more importantly to his fellow participants in the independent living program. His behavior and the community's reaction to it can have an effect on how viable independent living will be as an option for the older foster child. The counselor should talk plainly and directly to the youth about the need to use good judgement and to practice discretion in his behavior. Because he is identified as a foster child his actions will be under closer scrutiny by friends, neighbors, schools and employers. Delinquent acts and violation of community standards that might be ignored if committed by peers stand a good chance of being more aggressively pursued when the same acts are committed by a foster child. The reality is that with no family to come to his aid and assistance the youth in independent living is apt to face more aggressive pursuit of his misdeeds just because he has no parents who are willing and able to provide support and to demonstrate an interest in what happens to him.

k. Managing the Independent Living Case. The job of helping the foster child make the transition from adolescence to adulthood presents some unique challenges to the case manager. First, the goal is unusual. The more common goal in child welfare is some form of dependency; either return home to parents, placement for adoption, or continued foster care. The goal of the independent living program is emancipation from a state of dependence to one of independence. Second, because the goal is oriented towards the adult world, services to the youth are found more in the adult service system; e.g., referrals to vocational rehabilitation, the job service, housing authority, and the world of work. The third difference is the type of relationship that the foster care counselor and young adult have. The young adult will start to respond to professional staff more as someone they know, like and respect rather than out of deference to their title or position as agent of the department.

(1) Whether they be in foster care, group care, in their home or in independent living, adolescents face four common developmental tasks:

(a) They must separate from their families. This isn't just moving out of the family home, but includes a departure from childhood.

(b) They must establish their own identity. This search for self-identity is often a cause of much parent-child conflict. The search involves a trial and error approach, and some adolecents suffer severe consequences from their errors.

(c) They must develop adult social skills. These include the skills necessary to develop the capacity for interpersonal intimacy. A good measure of this skill acquisition is the youth's ability to contribute to others rather than manipulate others to see what they can get or be manipulated by them.

(d) They must clarify their vocational interests. The most common way that people support themselves is by getting a paycheck for doing a job. The task for adolescents is to investigate their strengths and weaknesses, and likes and dislikes in relationship to the kind of work that they want to do.

(2) These four developmental tasks should frame the work that is done with the young people in the independent living program. This common framework will help the counselor identify what is normal development, assess the behaviors exhibited by the youth, plan services that will meet the needs of each youth, and evaluate the effectiveness of service delivery.

l. Case Management Procedures.

(1) Assessment. When a youth is identified as a potential candidate for the Independent Living program, the foster care worker should first conduct an assessment that is focused on the candidates ability to successfully complete the program. There are three major goals of this assessment:

(a) To identify the young persons objectives in terms of a long-term goal;

(b) To identify barriers/problems to achieving those objectives;

(c) To identify client and environmental resources and assets that may be used to overcome the identified barriers/problems.

(2) At all times it should be remembered that the assessment and planning process is done with the young person. It is their life so it will be their goals and objectives, informed and guided by the foster care counselor, which must be the focus of the assessment. With younger children, the department has a right and an obligation to make most of the major and minor decisions. With adolescence there is a gradual recalibration of the balance of power between the youth and the adults in their life. While this is not a well-defined process with definite mileposts which apply to all youth, the foster care counselor should be aware of the need to gradually give the young person more responsibility for their own life.

(3) Application for the Program. After the initial assessment has been completed if the foster care counselor and the youth want to proceed with application for the program, they will complete the application form (HRS-CYF Form 5113) for the Administrative Review Committee, or other staffing forum that the district establishes. The child will also write a letter to the committee stating why he wants to become a part of the Independent Living Program, what goal he wants to achieve and what they will be doing while in the program to achieve that goal. After supervisory review, the completed application form and the young person's letter will be submitted to the appropriate staffing committee.

(4) It is suggested that the foster child complete the application form himself. All of the information requested in the form should be known by the youth. The counselor can help the youth supply any missing information and can correct any misinformation that may have been entered on the form by the applicant. This exercise serves three purposes:

(a) It prepares the child for filling out applications, a tedious, repetitious activity used to acquire jobs, receive credit, and to obtain a place to live.

(b) It will contribute to the pool of data necessary to making an informed decision on the applicant's preparedness for independent living.

(c) It is an avenue for the youth to seek out information about himself and his family that he may not have been aware of, or about which he may have been misinformed.

(5) The counselor must review the application completed by the youth, and discuss with the applicant parts of the form that the youth wasn't able to answer. The counselor must also examine responses that deviate from the way the counselor would have responded if she were completing the form for the youth, and discuss these with him. This is not meant to be an opportunity for the counselor to change the application, but it is a time to discuss areas of confusion or disagreement with the youth.

(6) Parental Consent. If the parents are available, but refuse to give their permission to the plan for independent living, consideration must be given to their explanation of why they don't want their child in the program. After discussing the plan with the parent, and listening to the parents rationale, the counselor may still feel that independent living is the best plan for the youth. At the staffing of this case by the administrative review committee it must be reported that the parent is against the plan. If the staffing results in approval to proceed with the plan then the court should also be informed that the parents are against this plan at the Judicial Review hearing and court permission should be secured. If the parents are available they should indicate their consent to the plan or disagreement with it in writing. Any parent should be notified

of a court hearing without regard to their consent to the independent living placement.

(7) Staffing the Independent Living Case. The purpose of staffing is to help the worker and youth decide if independent living is the best plan, what information still needs to be collected, what services and community resources could best help the youth achieve the goal of independence, and mutually agree with the youth and worker how long the youth should be in the program. The product of the staffing should be a list of elements that will be used by the worker to prepare the case planning document between the youth and the agency. The department should commit itself to, at the minimum, a definite length of time the youth can stay in the program, the amount of the maintenance subsidy, and the frequency of supervisory contacts. The participating youth will commit to a plan of contact with his worker; a source of income outside of the department's maintenance subsidy; and a plan that will result in their emancipation from the department by the end of the program. Both the worker and the youth will attend these staffings to provide information to the staffing panel and to receive clarification on any issues that might be the cause of uncertainty. If the youth wants to bring a potential roommate, employer, relative, or friend to the staffing to vouch for his character and/or provide support, this should be an option.

(8) Frequency and Purpose of Worker/Client Contact. During the first three months of an independent living placement, the worker and participant will have at least two contacts per week. At least one of these contacts must be in the residence of the youth. The early contacts will be used to assess the participants strengths and weaknesses in maintaining themselves materially. Use of guides such as "Making It On Your Own" published by the School of Social Work at Virginia Commonwealth University or "Florida Survival" distributed by Westwood Press, Inc., New York, New York is suggested prior to the child entering the program. These books cover the areas of job hunting, apartment living, home management, shopping, transportation, health, leisure, and money management.

(9) Using the tasks stated in the case planning document, the worker and youth should work out a time table that provides a count down to emancipation from the independent living program. It is suggested that these objectives be reduced to realistic tasks that can be accomplished in small blocks of time. The accomplishment of these tasks will provide a feeling of success, and give confidence to the youth for some of the more difficult objectives that they have set up for themselves.

(10) A sample format to record the outcome of contacts between the counselor and the youth is provided as attachment two to this chapter. This form can be used to measure progress, to identify resources, and to make assignments for the different areas of the participants life on which they and the worker are concentrating their efforts.

(11) Case Review. Since participants in the Independent Living program remain in the legal custody of the department, they are still subject to periodic reviews, both administrative and judicial. A special focus of review of independent living cases is on the progress that the youth is making toward the goal of becoming a self-sufficient adult. The specific measures that should be reviewed include the acquisition of adult living skills, the ability to find and keep employment (keeping in mind that unemployment in this age group is high), the quality of decision making skills including how discerning they are about when and from whom they seek advice, money management skills and their ability to live cooperatively with roommates and neighbors and to resolve conflicts with others in a mature manner. The counselor must not wait for a regularly scheduled review if she is experiencing difficulty in managing an independent living case. If, after extensive efforts to correct the situation, the youth, for example, continues to be in trouble with the law, is fired from a succession of jobs and is not able to live within his budget then the counselor may want to request a review to consider the possibility of removing the youth from independent living and returning him to a more restrictive setting. The counselor and the youth may find, after a few months, that independent living is not really what the participant wants or needs. Do not feel the need to continue with independent living if it is failing or if the youth is asking to be removed from that status.

m. Specialized Caseloads. Because of the special needs of this population, and the special skills involved in working with older foster children, districts may want to give consideration to having individual foster care staff carry independent living caseloads. Supervisors may be aware of staff who have special talent with this group, or who especially enjoy working with adolescents. Any one staff who is assigned a large number of independent living cases should have a protected caseload to allow the more frequent contacts required in these cases and to develop the network of community resources to help these young people move out into independence.

n. Support for the Youth From Relatives, Friends and Neighbors.

(1) Prior to placement in an independent living situation, the counselor and the youth must identify adults that the participant sees as supportive and helpful. The counselor and the youth should decide which of these people would be suitable to the participant as an advisor or mentor. (If the youth wants more than one person to play this role and more than one can be recruited to serve in this capacity this is permissible.) The counselor and the youth should approach the potential volunteer to ask if they would be willing to have this relationship with the youth. The purpose of the independent living program should be described to them, and they should be told their responsibilities, which are:

(a) Complete an orientation to the program provided by the counselor.

(b) Participate in the development of the Performance Agreement prepared by the counselor and the youth.

(c) Be accessible to the youth either by phone or proximity.

(d) Meet with the youth on a weekly basis for the first three months and more often if necessary to discuss progress towards the goal of independence.

(e) Maintain weekly contact with the counselor and provide written reports when the counselor thinks that they would be helpful.

(f) Participate in reviews and staffings as long as the youth is in the independent living program.

(2) Examples of who these people might be include relatives, former foster parents, volunteers from service or civic organizations, or others in the youth's network of friends or acquaintances who have shown an interest in his future, and who would be a good role model of an independent adult.

o. Independent Living as a Purchased Service. There are a few providers across the state that will supply an independent living program for clients of the department. As the market increases many more private nonprofit agencies may develop this type of program. If you are interested in referring one of your clients to a Purchase of Service agency for their independent living program consult the district program office in which the agency is geographically located for a description of the program offered.

4-3. Continued Financing of Foster Care at Age Eighteen. Foster Care services may be continued for young adults 18 to 21 years old, only when they are enrolled in a high school, or in a program leading to a high school equivalency diploma and no appropriate alternative plan can be developed. Foster Care services must be terminated upon completion of termination of the educational program. If they are not in one of the above educational programs, foster care services must be terminated when the dependent child reaches age 18. It is essential, therefore, that Foster Care staff work closely with the older adolescent, his family, department and community resources to assure that appropriate plans, either for return to family or independence, have been made. Performance Agreements or Permanent Placement Plans for each 16 and 17 year old child must state the specific steps that are being taken to assist them in becoming an independent adult whether they are in a placement or in independent living.

4-4. Marriage of Minor Children. Section 741.0405, F.S., states that when someone under the age of 18, but at least 16 years of age wants to be married, the county clerk or judge must first have on file the "...written consent of the parents or guardian of such minor to such marriage". Because a foster child is in our custody does not mean that we are his guardian, and can consent to his marriage. Only a parent or legally appointed guardian has the right to consent to the marriage of a child. In the absence of parents, a legal guardian is someone who is appointed by court order and who possesses letters of guardianship. Therefore, the fact that the department has custody of a dependent minor child does not in and of itself make the department that child's legal guardian, nor does it terminate the right of that child's parents or legal guardian to consent to the marriage of the child. It must also be pointed out that according to Section 743.01, F.S., marriage removes the disability of nonage from the minor, and therefore tht person's status as a dependent child is terminated along with the department's legal custody.

4-5. Pregnancy.

a. A foster child who becomes pregnant must be offered medical services to ensure her continued health, as well as that of her unborn child. The status of pregnancy per se does not exclude her from any of the services or programs within the department for which she would otherwise be eligible. An expectant mother needs acceptance, understanding, and assistance in determining what plans are best for her and her unborn child. It is recognized that pregnancy in adolescence in itself is a high health risk to both the expectant mother and child.

b. Pregnant youngsters must have Performance Agreements which include appropriate health services and medical care. If there is a suspicion or likelihood of pregnancy, the counselor must secure a diagnosis of pregnancy by a licensed physician. Obstetrical and counseling services should be obtained as soon as the pregnancy is diagnosed.

c. The expectant mother should not be coerced, persuaded, or encouraged to terminate or to maintain the pregnancy solely because she is pregnant. Each youngster should be dispassionately and professionally counseled as to the range of options available to her and the associated risks with each of the options. Such counseling should respect her religious, ethical, and moral beliefs.

d. The parents of a minor child should be informed of their daughter's pregnancy. First, ask the girl if we can advise her parents of the pregnancy. If she says we may there is no problem. It is preferable, however, for the youngster herself to inform her parents. If she refuses to tell her parents and requests that we not tell her parents then the reasons for her refusal should be ascertained and the district program office and district legal counsel consulted. If, after this consultation the facts of the case, such as the mental illness, retardation or extreme immaturity of the minor, leads to the decision to inform the parents of the pregnancy, then the minor must be informed of this decision prior to contacting the parents. Under whatever circumstances parents are informed of their daughter's pregnancy, they should be encouraged to lend support and guidance to their daughter as she considers the options available to her.

e. After it is established that the girl is pregnant, and it has been decided to either inform or not inform her parents of the pregnancy (following the sequence described above) a second decision faces the youngster. That decision is whether to continue or terminate the pregnancy. Legally, the decision to terminate a pregnancy must be entirely and exclusively between the youngster and her doctor. If the youngster wishes to consult with clergy or to seek advice from people whose opinions she values, the foster care counselor will assist her in making those appointments. If there is some question as to whether she can make an informed decision on this matter because of mental illness, retardation, extreme immaturity, or some other related reason then the district program office and district legal counsel must be consulted. If the decision is to seek parental consent, then the youngster should be informed of this decision. Under no circumstances should the foster care counselor or other department employee sign consent to an abortion for a foster child.

f. Consultation with district legal counsel should take into account current case law that speaks to the issues of minors, pregnancy, abortion and parental notification. Two such decisions are described below. First, a recent Supreme Court decision indicates that it is not unconstitutional for a state to require a physician to notify the parents of a minor of that minor's decision to obtain an abortion. See H. L. v. Matheson, 450 U.S. 398, 67L. Ed2d. 588, 101 S.Ct.1164 (1981). However, caution must be exercised as a minor is capable of making an informed decision on abortion. Second, the fundamental right to an abortion applies to minors as well as adults. Gerstein v. Coe, 96 S.Ct. 3202. 428 U.S. 901, 49 L. Ed.2d 1205. When the minor does not wish her parents involved in the decision to abort, she and her parents (where the parents have already been advised of the pregnancy) must be advised that the abortion decision is ultimtely their daughter's alone and that the parents have no final and absolute say in the matter. Any time a minor foster child desires to seek an abortion, the counselor must first consult with the district program office and district legal counsel. Such consultation will ensure that the department has adequately reviewed the youngster's case.

g. Medicaid reimbursement is available only for abortion services provided when the life of the mother would be endangered if the fetus were carried to term. All claims submitted for abortion services must be accompanied by the attending physician's documentation that certifies that the abortion was performed due to life endangering circumstances, specifies the name of the recipient, and is signed by the attending physician. All claims submitted without this documentation will be denied.

h. The same restrictions apply to general revenue funds if the child is not eligible for Medicaid.

4-6. Teenage Parents in Foster Care. The teenager who becomes pregnant while living in a foster home usually needs help from the counselor, through a series of interviews, to arrive at a suitable and realistic plan for her own future and that of her baby. She should be given adequate counseling to make a choice between keeping and caring for her child or relinquishing the child for adoptive placement. Many communities have agencies who are staffed with people trained to provide pregnancy counseling. The foster care worker may want to use such a resource if only to assure the child that she is receiving advice from an objective source.

a. If the young mother is undecided about the future of the baby or wishes to keep the baby but has not evidenced sufficient maturity and stability to make this a realistic plan, the baby should be placed in a separate foster home. Such placements should be time-limited with the department providing regular counseling to the girl (and the child's father, if known). A permanent plan should be made within six months of the infant's placement. It is important that the department does not permit such an infant to "drift" in Foster Care for long periods of time, without permanent plans being made. This is particularly true in situations where immature young parents will not be able to care for their children within a foreseeable time.

b. If the mother decides to place the baby for adoption, plans for adoption should be worked out with the appropriate voluntary adoption agency.

c. If the mother chooses to keep her child permanently and she has demonstrated by her behavior in foster care that she has the capacity to care for the child adequately, it is desirable for her and her child to live in the same foster home. This placement should continue until she completes school and can make an independent plan. This arrangement has the advantages of preventing total separation, nurturing the mother's maternal feelings and providing the opportunity to learn child-caring skills from the foster parents.

d. If it is necessary to place the girl into a new foster home with her baby, she should not be placed with other adolescents.

4-7. Driver Licenses. The department is not able to authorize a minor to secure a driver's license. Even though it is desirable and the department would like to provide this experience for young people, it is prohibited by the absence of insurance protection. Should foster parents be willing to obtain the necessary insurance protection, they may authorize the minor to secure a driver's license. The Florida Division of Driver Licenses allows a "responsible adult" to sign for minors who are not in the custody of either parent. By signing for the minor to have a license, the foster parent is assuming responsibility for that minor's actions as a driver. It should be carefully explained to foster parents that the department does not provide automobile insurance, and that they are assuming responsibility for their foster child's actions by authorizing the minor to secure a driver's license. This notice to the foster parents must be documented in the child's case record. If there is evidence that the current placement will not last until the child is 18, authorization for a license should be withheld as subsequent foster parents may not be willing to assume responsibility.

4-8. Earnings from Part-Time Employment. Older children should be encouraged to take part-time jobs which will not interfere with school work in order to gain work skills and gradually prepare for independence. The money earned should be managed in such a way that it contributes to further work motivation, as well as the development of self-reliance.

the state board only one chairman for every three boards. Terms of office of members of the state board, who are local board members, shall be coterminous with their terms as chairmen of local review boards. Terms of office of members who are appointed by the supreme court shall be not less than two years, nor more than five years.

B. The state board shall select a chairman and a vice-chairman and such other officers as it deems necessary.

C. The state board shall meet no less than twice annually and more frequently upon the call of the chairman or as the board shall determine. The supreme court is authorized to promulgate reasonable rules relating to the functions and procedures of the local boards and the state board in accordance with the duties of such boards as provided in this article. The state board shall review and coordinate the activities of the local boards and make recommendations to the supreme court, the governor and the legislature on or before January 15 of each year regarding foster care statutes and policies and procedures.

D. The supreme court shall employ a coordinator and such other personnel as it deems necessary to carry out the duties of the state board and the local boards. Compensation for all such personnel shall be as determined pursuant to section 38-611.

E. The state board shall establish training programs for local board members, which shall include periodic in-service training.

F. State board members shall be compensated as determined pursuant to title 38, chapter 4, article 2.

8-516. Supervision of foster homes; reports; review of file; progress report

A. A licensed child welfare agency shall maintain supervision of all children placed by it in foster homes and such foster homes.

B. The agency's representative shall contact the foster homes and written reports of his findings shall be maintained by such agency, subject to the review of the division.

C. Receiving foster homes shall be visited at least once per month.

D. Regular and special foster homes shall be visited at least once every three months.

E. A complete review of the placement and progress concerning a child in a foster home shall be made by the division or the agency, if the juvenile court has awarded custody of the child to the agency, at least every six months. The division or agency shall prepare a progress report resulting from the review and a copy of such report shall be sent to the juvenile court. The progress report shall include:

1. An assessment of the extent to which the division or agency is accomplishing the purpose of foster care for the child as described in the plan established pursuant to section 8-511, subsection B.
2. An assessment of the appropriateness of the plan.
3. The length of time the child has been in foster care.
4. The number of foster home placements the child has experienced while in foster care and the length of each placement.

8-517. Withdrawal from foster home

The division or agency that placed the child may withdraw a child from a foster home when the division or agency determines that withdrawal is necessary for the child's interests and welfare.

8-518. Central registry; change of address; marital status

A. The division shall maintain a central registry of all licensed foster homes.

B. All foster home parents shall report any change of their address or marital status to the division and agency.

8-519. Records and reports

A. Each child welfare agency shall keep records regarding the children in its care as the division prescribes and shall furnish to the division, upon request, such additional information as the division requires.

B. Upon the request of a foster care review board, any record pertaining to a case assigned to such board, kept by the division or a child welfare agency, shall be furnished to the board.

C. All records and information in the possession of the foster care review board regarding children and their parents or relatives shall be deemed confidential, and shall be disclosed only pursuant to this article or by order of court.

D. A child welfare agency shall furnish a report of each placement or withdrawal of each child to the division.

8-520. Violation; classification

Any agency, society, association, institution or person, whether incorporated or unincorporated, and any individual acting for or in its name, which engages in caring for children or children and adults or of placing children for care pursuant to this chapter, without having first procured a license as a child welfare agency as provided in this chapter, or which knowingly fails or refuses to report as required by the provisions of this chapter, or which knowingly obstructs or hinders the division or its agents in inspection or investigation of the agency, societies, associations, institutions or persons under its control or charge, or any person knowingly violating any of the other provisions of this chapter is guilty of a class 2 misdemeanor unless another classification is specifically prescribed in this chapter.

8-521. Independent living program; conditions; eligibility; rules and regulations; reports

A. The department may establish an independent living program for youths who are adjudicated dependent and are:

1. In the custody of the department;
2. At least seventeen years of age; and
3. Employed or full-time students.

The independent living program may consist of a residential program of less than twenty-four hours a day supervision for youths under the supervision of the department through a licensed child welfare agency or a provider under contract with the department.

B. Under the independent living program the youth is not required to reside at a licensed child welfare agency or foster home.

C. The director or his designee shall review and approve any recommendation to the court that a youth be ordered to an independent living program.

D. For a youth to participate in the program, the court must order such a disposition pursuant to section 8-241.

E. The department shall provide the cost of care as required by section 46-134 for each child placed in an independent living program pursuant to this section, except that the monthly amount provided shall not exceed the average monthly cost of purchased services for the child in the three months immediately preceding placement in independent living.

F. The department shall promulgate rules and regulations pursuant to title 41, chapter 6, article 1 to carry out the purposes of this section.

G. The department shall provide quarterly progress reports to the court and to local foster care review boards for each youth participating in the independent living program.

H. The local foster care review boards shall review at least once every six months the case of each youth participating in the independent living program.

West Virginia

13900 Independent Living Subsidy Program

13910 Definition and Purpose

The Independent Living Subsidy Program permits a young person 17 years of age and older who is in the custody of the Department of Human Services to live without daily substitute parental supervision. The purpose of the program is to provide an avenue through which the youth can learn to live independently and responsibly. By the end of the program, the youth should be self-sufficient.

13920 Eligibility Requirements

A young person eligible to participate in the program:

1. Is at least 17 years of age but not yet 21 years of age, and
2. Has been in the custody of the Department or other state agency for at least six months prior, and
3. Has written approval from parent or legal custodian, if under the age of 18, and
4. Has a plan for self-sufficiency that is achievable within 18 months, and
5. Has demonstrated an ability to handle independence as evidenced by responsible behavior during his placement, such as maintained part-time employment, established a savings program, maintained regular attendance at school or training program, etc., and
6. Is capable of contributing a minimum of $75 per month to his/her financial support through a combination of earned and unearned income (see Section 13950 for definitions), and
7. Has obtained the basic life skills necessary for beginning independent living as is evidenced either by satisfactory completion of independent living training provided by the foster parents, provider, worker, school or community volunteer, or by demonstration through the practical application of these skills.

   The minimum basic living skills include:

   - use of available public transportation
   - nutrition and menu planning

- economical grocery shopping
- cooking
- use of laundry equipment
- financial management - maintaining a checking account or other money management system
- shopping for necessary goods and services
- job hunting
- apartment hunting
- knowledge of birth control
- ability to manage health needs
- use of leisure time

8. Is willing to work with responsible adult (other than the social worker) who will be the youth's volunteer independent living advisor until the goal of independence is achieved. ~~(see Section 13980)~~

13930 Independent Living Residences Minimum Standards

Independent living residences shall meet the following minimum standards:

1. Be located so as to provide reasonably convenient access to schools, places of employment or services as required by the individual.
2. Comply with applicable state and local zoning; fire, sanitary and safety regulations.
3. Provide a setting which is conducive to good mental health and progress towards independence for the young adults, as determined by the Department.

The worker must determine that the residence meets these minimum standards before a lease is signed or a commitment is made to use the residence.

13940 Approval Process

Once the social worker has identified a youth for whom independent living may be appropriate or a youth requests an independent living arrangement, a plan must be developed and submitted to the area administrator and the Administrative Review Committee for approval along with documentation that all other eligibility requirements have been met. The plan is a written agreement developed and signed by both the worker, the youth, and the volunteer independent living advisor.

The written agreement shall include, but is not limited to the following:

1. Clearly stated responsibilities of the youth, the worker, and the advisor.
2. The anticipated length of time independent living support will be needed until the youth is fully independent (not to exceed 18 months) and the review dates to determine progress.
3. The education/training and work plan that will provide full-time activity for the youth.
4. The plan for assisting youth in increasing his knowledge and skills in such areas as budgeting, household management, etc.
5. The plan for supervision of the youth including worker contacts, other agencies to be included if any, and contacts with the advisor.
6. The plan for financing independent living specifying the amount the youth will contribute and the amount to be provided by the Department (see Section 13950 for guidelines)
7. A statement explaining how the Department's portion will decrease as the youth's income increases.
8. Target dates for when the youth's income will increase and when he will become financially self sufficient.
9. A budget outlining the youth's proposed monthly expenditures.

10. A statement outlining action that will be taken if the youth fails to use total funds for necessities of life and other agreed-to-expenditures or fails to adhere to other parts of the agreement.

11. A statement explaining the youth's responsibility to inform the agency within 72 hours of any major changes in his/her situation. (loses job, leaves educational/training program, moves, is arrested, etc.)

13950 Financing Independent Living

Start Up Costs

Initial expenses related to setting up a household may be partially subsidized by the department. Initial expenses may include such things as rent deposits, utility deposits, bedding and kitchen equipment. Requests for assistance with start-up costs should list specifically what is needed and be submitted to the coordinating social services supervisor for approval. The coordinating social services supervisor can authorize payment up to $250. The youth may also use the excess of Social Security or other benefits to cover the start-up costs.

Monthly Payments

Financial assistance to the youth in independent living is provided as a supplement to the youth's earned and/or unearned income.

Earned income is the net money received in the form of wages, salary, or profits from self employment activities.

Unearned income is money provided through scholarships or stipends to cover the costs of room and board payments. Tuition waivers or scholarships that cover tuition and fees is not considered income. Unearned income also includes the past and present excess of benefits (i.e. Social Security, Veterans, Railroad Retirement, etc.) that have not been used to cover the boarding care rate.

The youth may elect to save 25% of his earned income without affecting his independent living subsidy.

The maximum combined income a youth in the Independent Living Subsidy Program is allowed is $450. The $450 includes the youth's earned income, minus the savings, any unearned income and the department's subsidy payment. Example:

A youth earns $120 per month as a part-time worker at a fast food chain. He elects to save 25% or $30. His total contribution is $90. The $90 is subtracted from the maximum allowable income of $450, leaving $360 which is the amount of the subsidy.

Medical Coverage

The youth in independent living will continue to receive his medical card. The youth will be given a provider number (F). The youth will receive a one dollar payment and a medical card monthly. The same provider number is to be used in making the monthly demand payments as outlined in Section 13,960 below. The total amount of the monthly demand is reduced by one dollar.

Savings

Those youths electing to save 25% of their earned income must establish a savings account. This account will be jointly held with the area administrator or coordinating social services supervisor and will require both signatures for withdrawal of funds. Money accrued in the savings account can be spent only if the worker and youth have established a plan for such expenditures.

Expenditures might include the purchase of special work equipment, household equipment, additional furnishings, etc.

Gradual Reduction of Subsidy Payments

The written agreement prepared by the worker, youth, and advisor will address the time period in which the youth will require the subsidy payment and the target dates at which his income will increase. It is expected that the youth's income will gradually increase and that the subsidy payments will gradually decrease during the time allotted in the written agreement.

13960 Payments for Independent Living

Payments are made directly to the youth via a monthly demand payment initiated each month by the worker and approved by the supervisor. If the youth's resources change, the amount of the payment must be adjusted on a month by month basis. In the event that a major change occurs such as a youth drops of a training program or loses his job, continuation of the independent living plan must be approved by the coordinating social services supervisor.

13970 Responsibilities of the Worker

The workers assigned to the youth participating in this program have the following responsibilities:

1. Evaluate each youth's ability to assume responsibility and work towards the goal of independence within the 18 month time frame.

2. Document that the youth meets the eligibility requirements in Section 13920. The documentation is to be included in the youth's case record.

3. Determine and document that the independent living residence selected meets the minimum standards identified in Section 13930. The documentation becomes part of the case record.

4. Obtain written approval of the parent or legal custodian regarding the youth's participation in the program. The written approval may be omitted if it has previously been documented in the case record that the parents/legal custodians whereabouts are unknown.

5. Find a compatible advisor for the youth.

6. Establish a written agreement with the youth and advisor following the guidelines in Section 13940.

7. Call a meeting of the Administrative Review Committee to approve the agreement.

8. Review the agreement every three months. Revise and update necessary parts of the agreement. An extension in the time frame for goal achievement requires the approval of the coordinating social services supervisor.

9. Develop a monthly budget with the youth. Meet with the youth each month to review the budget. (Budget reviews may occur less frequently after the first six months if the youth demonstrates ability to maintain the budget). Approve any expenditures from the savings account.

10. Provide counseling services to the youth twice a month. Counseling is provided through face to face contact. At least one meeting per month should be at the youth's residence.

11. Provide an orientation of the Independent Living Subsidy Program to the advisor and maintain weekly contacts with the advisor during the first three months.

12. Initiate the subsidy payment each month.

13. Explore all possible financial resources to the youth (e.g. Social Security, VA benefits, etc.). Where such resources exist, they shall be applied to cover the cost of the subsidy payment.

13980 Qualifications and Responsibility of the Volunteer Independent Living Advisor.

Advisors should be at least 25 years of age and living successfully on their own for the previous two years. Advisors must be accessible to the youth either by phone or proximity. The advisor has the following responsibilities:

1. Complete an orientation of the Independent Living Subsidy Program.

2. Participate in the development of the written agreement prepared by the worker and the youth.

3. Meet with the youth on a weekly basis for the first three months and more often if necessary to discuss progress towards the goal of independence.

4. Be available to the youth if he/she initiates contacts beyond the required weekly meeting.

5. Maintain weekly contacts with the worker and provide written reports regarding the youth's progress.

6. Participate as a member of the Administrative Review Committee as long as the youth is in independent living.

13990 Conclusion on Participation

Participation in this program shall be concluded when the youth has:

1. Achieved independence to the extent that financial support and social services are no longer needed.

2. Made a voluntary decision to no longer participate in the program.

3. Had custody terminated by the Juvenile Court.

4. Generally demonstrated unwillingness or inability to meet the requirements of the program and the terms of the agreement.

5. In no case may Independent Living continue beyond 21. Should a youth not complete the program by his 21st birthday, the case must be closed at that point.

If it is decided to discharge a youth from this program as a result of "4" above, the worker and supervisor shall determine what further resources to be considered for the youth. The coordinating social services supervisor must approve the termination.

The worker shall notify the youth in writing 15 days in advance of the termination of subsidy. The notification shall include the date the subsidy will terminate and the right of the youth to appeal the decision. Refer to Chapter 16000 of the Social Service Manual for the grievance process.

CHILDREN'S SERVICES DIVISION	**MANUAL** SUBSTITUTE CARE MANUAL NO. V	**SECTION** E. TERMINATION OF SUBSTITUTE CARE **SUB SECTION:** Oregon	**NUMBER** V-E-5 TRANSMITTAL LETTER
	SUBJECT: 5. Independent Living Subsidy Program		OR

TO: C-5

Approved: Assistant Administrator
Community Resources

EFFECTIVE: February 1, 1982

Summary:

Page 4 of this policy is replaced with the attached replacement page which clarifies the statement that maintenance payments are not to exceed the legislatively approved rate.

Attachment "A" has also been rewritten to specifically state what the maximum payment per month is for a child in this program this fiscal year.

Remove	Date	Insert	Date
Page 4 V-E-5 Independent Living Subsidy Program	11-01-81	New Page 4 Independent Living Subsidy Program	02-01-82

1320A6/02-04-82

I. DEFINITION

The Independent Living Subsidy Program (ILSP) is one designed for young people 16 years of age and older who are in CSD's custody and who are working toward social and financial adult roles.

II. OVERVIEW

ORS 418.475 authorizes CSD, under certain conditions, to approve and subsidize independent living residences for minors. This program is designed for those young persons who cannot or should not be expected to adjust to a family. The goal of this program is to provide an avenue whereby the older child can work toward total emancipation: from a dependent living situation to a position of self-sufficiency through increasing responsibility through carefully planned graduated steps.

III. POLICY

The youth accepted into this program will be helped to learn to live independently, and responsibly. The service worker will be working closely with the participant, meeting at least twice a month to provide counseling and support. These young people will be engaged in short-term academic, vocational training and/or employment geared to the ultimate goal of self-sufficiency which must be reached within two years. The ILSP shall not be used to subsidize participants for a full four-year college or university degree, however, CSD will assist for a maximum of two years.

A. Young people eligible to participate in the program:

1. Are at least 16 years of age, have been in CSD's custody prior to their 18th birthday and/or are currently in CSD's custody, and
2. Have been placed in at least one substitute care resource, and
3. Have been determined by CSD to be unsuitable for placement in a substitute care resource, and
4. Have received written permission from the appropriate juvenile court, if they are wards of the court or from the parent(s) or legal guardian if not a court ward.

8. The agreement must also include a statement that CSD's subsidy will increase or decrease, based on the ability of the adolescent to meet total living expenses.

C. Participant's Monthly Budget.

An initial monthly budget will be developed with the participant, reviewed and revised monthly as needed. This budget will reflect current needs and will be used by the participant in money management to further self-sufficiency capabilities.

The following items should be considered in establishing a monthly budget for ILSP participants: rent, food, utilities (including telephone if needed and advisable), electricity and/or gas, laundry, dry cleaning, transportation, tuition and recreation costs.

D. Independent living residences include, but are not limited to, YMCA, YWCA, boarding house or apartment. They shall meet the following minimum standards:

1. Be located so as to provide reasonably convenient access to schools, places of employment or services, as required by the young adult.

2. Comply with applicable state and local zoning, fire, sanitary and safety regulations insofar as can be determined by CSD.

3. Provide a setting which is conducive to good mental health and progress toward independence for the young adults, as determined by the Division.

Staff assigned to the program are expected to ascertain that the above minimum requirements, as well as any other requirements that the local office establishes, are met. Documentation shall be contained in the case record.

E. Payment to children in such residence placement is to be based on the following conditions:

1. In addition to monthly subsidies, start-up costs may be authorized for an adolescent entering the program. However, every effort should be made to keep start-up costs at the minimum amount possible.

H. A youth is entitled to Title XIX medical benefits only if state funds are used for maintenance. CSD will not pay for any medical insurance. The initial medical I.D. card should be issued by the local branch office if the child is eligible for Title XIX benefits. Document medical eligibility per V-C-11. (Refer to IIS User's Guide, Chapter 2, for method of authorization.)

I. Resources to which participants are entitled (e.g., parental support, OASDI benefits, Veteran's benefits) are to be utilized for child's support whenever possible using a CSD Trust account. (See Trust Policy XI-E-2.6.1.)

J. Conclusion of Participation

1. Participation in this program may be concluded when the young person has:

    a. Achieved self-sufficiency to the extent that there is no longer a need for financial support and social services from CSD.

    b. Made a voluntary decision to no longer participate in the program.

    c. Generally demonstrated inability to meet the requirements of the program or the terms of the contract.

    d. Had custody terminated by the Juvenile Court.

2. If it is CSD's decision to remove a child from participation in this program for reasons stated in (c) above the following applies:

    a. There must be an administrative review and approval. Regional/Branch procedures will be followed. At a minimum the supervisor of the worker must approve the removal in writing.

ATTACHMENT A

PAYMENT RATES

Effective October 1, 1981 the maximum monthly cost allowed per child is $304.

Start-up costs may be paid up to a maximum of $250.00 per child.

418.445 Surrender of children by juvenile court to institution receiving state aid. In all cases where the parents or guardian of any such child as mentioned in ORS 418.440 are not known or cannot be found, the judge of the juvenile court of the county in which the child is found may make surrender of such child to any institution entitled to receive state aid pursuant to ORS 418.405 to 418.455. [Formerly 419.218; 1967 c.534 §18]

418.450 [Formerly 419.220; repealed by 1967 c.534 §34]

418.455 Institutions may exercise authority of guardian. Any institution entitled to receive state aid pursuant to ORS 418.405 to 418.455 is entitled to the custody and guardianship of such children as are surrendered into its keeping as provided in those sections, and may exercise all the rights and authority of guardians under the laws of this state and may exercise all the rights and authority of the parents of such child in any proceeding for the adoption of such child. [Formerly 419.222]

418.460 Certain state-aided institutions must collect funds from parents for support of children. Every benevolent and charitable institution which receives state aid for the care and support of children committed to it by the juvenile court shall collect, so far as practicable, the funds for the support of such children which have been adjudged by the courts committing them to the institution. Such institutions may apply to the court for execution or other action, as provided in ORS 419.515, for the purpose of making such collections. In case of voluntary commitments or persons voluntarily becoming inmates of such institutions, each such institution shall ascertain, so far as possible, whether or not the voluntary inmate or his parents are able to support such inmate and shall exert its best efforts to collect such funds for such support. [Formerly 419.566 and then 419.224]

418.465 Agencies and institutions to submit estimates of state aid required for biennium. The agencies and institutions certified pursuant to ORS 418.005 to 418.025, 418.035 to 418.315, 418.355 to 418.370, 418.405 to 418.470, 418.505 to 418.565, 418.610 to 418.685 and 418.705 to 418.730 and otherwise qualified to receive state aid thereunder shall, through an organization representing such agencies and institutions, submit to the Executive Department, as though such organization were a state agency subject to ORS 291.208, an estimate of the amount of such state aid to which they may become entitled during the biennium commencing on July 1 of the following year. The organization representing the agencies and institutions shall consult with appropriate state agencies prior to submitting their estimate and shall supply such other information in support of such estimate as may be required from time to time by the Executive Department. [1963 c.150 §2]

418.470 Authority to pay for shelter-care homes. (1) The Children's Services Division may engage and make reasonable payment for services of persons to make available, maintain and operate shelter-care homes for the safekeeping of children taken into temporary custody pending investigation and disposition.

(2) The services, pursuant to specific prior authorization of the division, shall be deemed actually rendered if the shelter-care home is made available, maintained and operated to receive such children. [1969 c.184 §1; 1971 c.401 §36]

INDEPENDENT RESIDENCE FACILITIES

418.475 Independent residence facilities; extent and nature of agreement between minor and division. (1) Within the limit of moneys appropriated therefor, the Children's Services Division may establish or certify independent residence facilities for minors who:

(a) Are 16 years of age or older;

(b) Have been placed in two or more foster homes, group homes, youth care centers or institutions, or a combination of them;

(c) Have been determined by the Children's Services Division to be unsuitable for placement in a foster home, group home, youth care center or institution;

(d) Have received permission from the appropriate juvenile court, if they are wards of the court; and

(e) Have been determined by the Children's Services Division to be suitable for an independent resident program.

(2) Residence facilities shall provide independent housing arrangements with counseling services and minimal supervision available from at least one counselor; and all resi-

OR

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418.460 Certain state-aided institutions must collect funds from parents for support of children. Every benevolent and charitable institution which receives state aid for the care and support of children committed to it by the juvenile court shall collect, so far as practicable, the funds for the support of such children which have been adjudged by the courts committing them to the institution. Such institutions may apply to the court for execution or other action, as provided in ORS 419.515, for the purpose of making such collections. In case of voluntary commitments or persons voluntarily becoming inmates of such institutions, each such institution shall ascertain, so far as possible, whether or not the voluntary inmate or his parents are able to support such inmate and shall exert its best efforts to collect such funds for such support. [Formerly 419.566 and then 419.224]

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(2) The services, pursuant to specific prior authorization of the division, shall be deemed actually rendered if the shelter-care home is made available, maintained and operated to receive such children. [1969 c.184 §1; 1971 c.401 §36]

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(a) Are 16 years of age or older;

(b) Have been placed in two or more foster homes, group homes, youth care centers or institutions, or a combination of them;

(c) Have been determined by the Children's Services Division to be unsuitable for placement in a foster home, group home, youth care center or institution;

(d) Have received permission from the appropriate juvenile court, if they are wards of the court; and

(e) Have been determined by the Children's Services Division to be suitable for an independent resident program.

(2) Residence facilities shall provide independent housing arrangements with counseling services and minimal supervision available from at least one counselor; and all resi-

dential facilities having six or more residents shall be licensed by the Department of Human Resources under ORS 443.400 to 443.455 and subsection (2) of 443.991.

(3) Each resident shall be required to maintain a program of education or employment, or a combination thereof, amounting to full-time activity and shall be required to pay a portion or all of his housing expenses and other support costs.

(4) The Children's Services Division may make payment grants directly to minors enrolled in an independent living program for food, shelter, clothing and incidental expenses. Such payment grants shall be subject to an agreement between the minor and the Children's Services Division which establishes a budget of expenses.

(5) The Children's Services Division may establish cooperative financial management agreements with a minor and for that purpose may enter into joint bank accounts requiring two signatures for withdrawals. Such management agreements or joint accounts shall not subject the division or any counselor involved to any liability for debts or other responsibilities of the minor.

(6) The Children's Services Division shall make periodic reports to the juvenile court as required by the court regarding any minor who is ward of the court enrolled in an independent living program.

(7) The enrollment of a minor in an independent living program in accordance with the provisions of subsection (1) of this section shall not remove or limit in any way the obligation of the parent of the minor to pay support as ordered by a court under the provisions of ORS 419.513. [1973 c.801 §1; 1977 c.717 §17]

PURCHASE OF CARE

418.480 "Purchase of care" defined. As used in ORS 418.480 to 418.500, "purchase of care" includes the purchase of institutional and foster family care and services, adoptive services, services to the unwed mother and her child and such other care and services as the Children's Services Division, in consultation with the Director of the Department of Human Resources, shall determine to be necessary to carry out the policy stated in ORS 418.485. [1971 c.457 §1]

418.485 Policy. It is the policy of the State of Oregon to strengthen family life and to insure the protection of all children either in their own homes or in other appropriate care outside their homes. In affording such protection, the Director of the Department of Human Resources shall in cooperation with public and private child-caring agencies develop a set of short-range and long-range priorities for the development of needed child care and services, such priorities to be periodically reviewed and revised as necessary. Such priorities are to be set out in a form enumerating the number of children in each category of need, the type of child care and services needed, the areas of the state where such care and services are needed, and the projected costs. The State of Oregon hereby commits itself to the purchase of care and services for children who need care and to encourage private child-caring agencies to develop programs required to meet the needs of the children of this state and money may be appropriated therefor. In developing programs necessary to meet the needs of the children of this state, the Director of the Department of Human Resources shall make every attempt feasible to develop community organizations. Such efforts to develop community organizations are to be documented and presented to the next session of the Legislative Assembly. [1971 c.457 §2; 1975 c.795 §3]

418.490 Coordination of state activities. In carrying out the policies of this state as stated in ORS 418.485, it shall be the responsibility of the Director of the Department of Human Resources to coordinate the activities of all state agencies that have responsibilities for care of children to insure the best care possible and to avoid duplication of effort or conflict in policy. [1971 c.457 §3]

418.495 Authority to purchase care; contract content. Within the limits of funds available therefor, the Children's Services Division may enter into agreements with licensed child-caring agencies and other appropriate facilities, including youth care centers, for the purchase of care for children who require and are eligible for such care, regardless of whether the children are wards of the state or whether the division is their guardian or has their custody or whether the children are surrendered to a child-caring agency or committed thereto by order of a court under ORS chapter 419. The agreement shall prescribe the procedures for payment, the rate of

APPENDIX A - YOUTH DEVELOPMENT PROGRAMS

YOUTH IN TRANSITION PROGRAM

A. Description and Purpose

The Youth in Transition Program (YTP) provides supplemental services and cash maintenance payments to adolescent youth for whom the Department is legally responsible. The purpose of these services and payments is to motivate and enable youth to attain economic independence and social maturity.

The procedures that follow in Section B through G describe:

- the eligibility requirements of the program
- how to gain approval for a youth to enter the program
- the initial and ongoing service planning necessary to successfully guide a youth through the program and monitor the youth's progress
- payment provisions of the program
- termination of services or discharge from the program

B. Eligibility Requirements

Adolescents considered for entrance into the YTP must meet the following criteria:

1) Youth must be seventeen (17) years of age but not yet 21

and

2) The Department must have court ordered legal responsibility for the adolescent

and

3) The permanency goal for the youth must be independence and the time limit for goal achievement shall be established upon date of entry into the program. Generally, the established time period for youth not attending college shall be six months to one year. A time period of more than one year, not to exceed an additional 12 months, requires prior approval of the Regional Administrator. For college students, YTP participation may continue until graduation or age 21, whichever occurs first, provided all other eligibility criteria are met

and

4) The youth shall reside in a home or a facility which receives no maintenance (room and board) payments for the youth from DCFS for any period of time during which the youth is receiving YTP cash payments

and

5) All other possible funding sources must have been applied for in order to supplement the program, e.g., Social Security or Veteran's Benefits, general education scholarships, student loans, tuition waiver or full-year tuition scholarships which provide a cash value of a minimum of $100 per month

and

6) The youth is capable of contributing a minimum of $100 per month to his/her financial support through a combination of earned income or other sources of income (unearned). However, the youth's maximum allowable income earned or unearned, cannot exceed $500 per month, including the DCFS payment. (See Section F,8, Income Calculation)

and

7) The youth must be in either one of these two situations:

   a) The youth must either be in full or part-time employment four (4) consecutive weeks prior to admission to YTP and be willing to participate in the program of services described in Section D below.

   or

   b) The youth must be in a college or junior college, vocational training, GED classes, or an alternative school program on a full or part-time basis. (However, the youth may not be participating in the DCFS Scholarship Program.)

C. Approval

Prior to acceptance into the program, the youth's worker shall meet with his/her supervisor and the Field Service Supervisor/Regional YTP Coordinator. Material presented to the group shall include the following.

1) A summary of the adolescent's experiences with the Department and basic information about him/her such as age, birth place, medical and dental examination results, and any recent (within one year) educational and/or psychological reports. All medical and dental examinations should be current before acceptance into the program. The summary should include information which illustrates the adolescent's maturity and readiness to enter the YTP.

2) Current CFS 497 series which demonstrates the permanency planning goal of independence and identifies the adolescent's level of functioning and individual needs as well as a schedule of required meetings and a projected discharge date set as one of the objectives.

When the worker's supervisor and the Field Service Supervisor/Regional YTP Coordinator concur that YTP is appropriate the worker shall:

// 1) Complete a Placement/Payment Authorization form (CFS 906) to reflect the independent living situation and authorize payment up to $200 using Service Code 0701. (See Section F for payment provisions as well as procedures 359.)

and

2) Provide the Field Service Supervisor/Regional YTP Coordinator with a copy of all appropriate documentation and CFS 497.

D. Service Planning

A service plan (CFS 497) will be developed for each youth in the YTP. The CFS 497 will be reviewed at the beginning of each term (minimally every six months) for youth in any educational/vocational program, and at least every six months for those youth who are not in school but who are employed.

The CFS 497 shall include:

1) A statement of a permanency goal of independent living and date for achievement of that goal.

2) Specifications of services to be provided, including the frequency of direct contact with the caseworker.

3) A schedule of quarterly contacts with youth in college or junior college.

4) A schedule of twice monthly meetings between the worker or service provider and the adolescent who is not in college or junior college. At least one meeting per month shall be in the youth's residence.

5) When the youth is in need of the following "life skills" a schedule of training sessions. Specific areas of training may be selected from the following list, depending on the youth's needs:

- Money Management. This skill is taught both by giving the youth the responsibility of arranging and paying for necessities as well as by casework monitoring and education in designing budgets.

- Vocational and Career Planning. This area is discussed with the youth during casework visits and counseling sessions in order to help him/her to evaluate progress in current program and future plans. Youth employment coordinator should be involved if available.

- Legal Rights and Responsibilities. Knowledge of basic areas of legal involvement will be taught to the youth during the counseling sessions. It shall include discussions regarding landlord and tenant rights, laws governing the use of credit, legal issues which may arise in employment and any other areas appropriate for the particular adolescent.

- Sex Education and Family Planning. Information regarding these areas shall be made available to adolescents in the program and will be discussed during counseling meetings in order to assure that the youth is aware of basic facts.

- Alcoholism and Drug Abuse. An alcoholism and drug abuse expert shall conduct at least one counseling session with the youth in order to impart information and to respond to the adolescent's questions. If it is determined that he/she is in need of further information or treatment, this shall be provided as recommended by the specialist.

- Adjustment Counseling. This is to be provided at several different levels. Weekly counseling sessions and casework contact would provide time for discussions regarding adjustment. If group counseling is available, peer exchanges of experiences would be a very effective teaching mechanism and support system. Finally, the caseworker must be available to the youth when the adolescent feels that he is confronted with a situation which he feels incapable of resolving.

- Homemaking Skills. The adolescent shall receive instruction in basic cooking, cleaning and personal care skills. Homemakers may be used to provide this instruction.

- Family Counseling. The families of adolescents shall be seen by the caseworker monthly if appropriate. A good relationship between the youth and his parents is a desired goal and shall be part of the service program.

E. Monitoring

1) Verification of School Enrollment. Workers shall verify with the school, college, junior college, trade school, etc., in writing, the youth's acceptance and enrollment into their program and the financial aid package available to the youth at the beginning of each term. The youth shall submit to his caseworker a copy of his grade report to verify his academic progress at the completion of the first term of school. Students are expected to maintain grades acceptable to the school. The worker shall request the school to notify DCFS if the youth drops out of school.

2) Verification of Employment. Workers shall, in writing, verify with an employer the youth's job status, including attendance and income, during the first month of employment.

3) Worker Visits. The worker or service provider shall meet with the youth twice monthly unless the youth is in college or junior college. If the youth is in college or junior college, quarterly contacts shall be made. One of those meetings with youth not in college or junior college must be in the youth's residence.

4) Evaluation of Progress. The youth's progress shall be evaluated during the case review in accordance with procedures 305, Client Service Planning. A copy of the 497 series shall, in addition to those specified in the procedures, be given to the Field Service Supervisor/Regional YTP Coordinator. The youth's progress toward the desired achievements for discharge shall be detailed on the 497 series.

5) Income Redeterminations. Income redeterminations are to be made every six months as a regular part of the case review for those youth who are employed.

Income redeterminations are to be made at the beginning of each term for those youth participating in an educational/ vocational program.

F. Financial Provision

1) Direct Payment to Youth. Payments to the adolescent by the Department will be made to him/her by mail. The Division of Program Operations shall be notified of any changes in payment amounts.

2) Payment Stops. Payments shall be stopped immediately if the youth fails to attend two (2) scheduled appointments with the worker or counselor, or if the youth drops out of his/her educational/ vocational program or fails to meet YTP requirements set forth in Sections D, E and G within three months after leaving school. The youth shall be notified in writing and may request a review of the decision in accordance with rules and procedures 309, Review and Approval Process.

3) Summer Payments for Youth in Schools. Youth who choose not to participate in summer school may transfer to foster care or remain in YTP with no interruption of payment until they return to school in the fall term.

4) Start-Up Expenses. Initial expenses related to setting up a household may be partially subsidized by the Department. The adolescent will present an itemized list of necessities to the worker. They will review it and the worker will authorize the payments of the necessary amount up to $100.

5) Medical and Dental Payments. The Department is responsible for payment for all medical and dental needs which fall within the Department's payment policy.

6) Income Considerations for Determining YTP Grant. Financial assistance to youth in independent living arrangements will be provided as a supplement to the youth's income. Income for purposes of calculating the YTP grant is defined as the youth's earned and unearned income, but not that portion of the scholarship which covers tuition and fees.

- Earned Income. Earned income is net remuneration, in cash, derived through the receipt of wages, salary for services performed as an employee, or profits from activities in which the individual is self-employed. Board and room payments which may be part of a scholarship or loan package shall be deemed to be earned income. Tuition waivers and that portion of scholarships or loan package which are counted toward tuition and fees are not considered as earned income.

- Unearned Income. Unearned income is all income other than that received in the form of wages, scholarships, salary or profits from self-employment. Such incomes include, but are not limited to, Social Security benefits, Veteran's benefits, Railroad Retirement benefits or monies received from a trust, regardless of payee.

7) DCFS Maximum Payment. The DCFS share of the youth's total income will be no more than $200 per month. A scholarship will be considered only to the extent that it contributes to room and board.

8) Income Calculation. The maximum combined income a youth in YTP is allowed, earned or unearned income (including DCFS payment), is $500.00/month. The formula for calculating the monthly YTP grant is:

   - The first $300 of income is not considered.
   - Every dollar over $300 available to the youth as earned or unearned income will be deducted from the maximum allowable YTP grant of $200.
   - Subtract the available monthly income to the youth from $500.

   To correct weekly or bi-weekly income to monthly income, multiply the weekly or bi-weekly amount by 4.3 or 2.16.

   Income available to youth in higher education is to be figured monthly by dividing the amount, by the period of time it is applicable, whether it be semester, quarter or entire school year.

G. Discharge from YTP

- Upon achievement of objectives as listed on the CFS 497 or age 21, whichever occurs first, the youth will be discharged from YTP. The planned discharge date is to be determined upon admission but may change if the student drops out of an educational/training program. Youth may remain in YTP provided they meet conditions set forth in Sections B, D and F, and if approved by the worker, supervisor and Field Services Supervisor/Regional YTP Coordinator.
- The discharge date for employed youth is to be determined upon admission to the program. The date may be changed at any review session to accommodate the youth's need for more or less preparation for independence. The Division of Program Operations shall be notified when changes are made which alter the planned discharge date.
- Three consecutive months is the maximum time that any youth may remain in the program without a job or other income as defined in Sections B and F. Any adolescent not working or in an educational program or without an income of a minimum of $100/month after three (3) consecutive months will be removed from the YTP. A plan

will be developed that will enhance the skills the youth has already acquired to become self-sufficient.

- Prior approval from the Regional Administrator shall be obtained whenever the established time period for youth not attending college is to exceed 12 months. This includes a time period of greater than 12 months established upon the youth's entry into the program or a time period that is changed during the youth's participation in the program to allow the youth to participate longer than 12 months. Under no circumstances shall the length of stay in this program exceed 24 months with the exception of college students who may participate in YTP.

- For college students participation may continue until graduation or age 21, whichever occurs first, provided all other eligibility criteria are met.

Desired achievements demonstrated by the adolescent at the time of discharge would include:

- Economic Self-Sufficiency. In order to demonstrate competency in this area, the adolescent must have been working for six consecutive months with an adequate income level to support himself. He must have arranged for medical insurance coverage.

- Adequate Housing in the Community. The youth must be currently residing in housing of an acceptable standard.

- Ability to Manage Resources. The adolescent shall have demonstrated an ability to budget money and time well as determined by the lack of crises due to lack of necessities.

- Sufficient Living Skills to Live On Own. These skills range from the ability to make change to knowledge about birth control.

- Realistic Goals and Expectations. Achievable plans should be made by the youth for future direction.

- Youth has complied with other tasks set forth in 497 series.

The determination of what is adequate and acceptable will be made by the adolescent, the worker, the supervisor and the Field Service Supervisor/Regional YTP Coordinator.

SUPERVISED INDEPENDENT LIVING PROGRAM

A. Description and Purpose

The Supervised Independent Living Program (SILP) provides supportive services and living maintenance to adolescent youth for whom the Department is legally responsible. The purpose of SILP is to assist youth who have demonstrated the minimum requirements for living independently to progress toward their goal of independence. SILP is a totally purchased service from licensed child welfare agencies having contracts with DCFS to provide SILP.

B. Eligibility Requirements

Adolescents considered for entrance into SILP must meet the following criteria:

1) Youth must be sixteen (16) years of age but not yet 21

and

2) The Department must have court ordered legal responsibility for the adolescent

and

3) The permanency goal for the youth must be independence and the time limit for goal achievement shall be established upon date of entry into the program

and

4) The youth must have some money management skills

and

5) The youth must be able to live in the community without continuous adult supervision

and

6) The youth must be willing and able to cooperate with the supervising agency to further develop independent living skills

and

7) The youth must have the ability and motivation to complete a training or educational program designed to assist financial independence

and

8) The youth must have the ability to manage day-to-day living skills in an apartment or board and room living arrangement such as meal preparation, maintaining proper nutrition, purchasing and caring for appropriate clothing and maintaining a reasonable degree of cleanliness

and

9) The youth must be reasonably expected to attain total independence within one year, progress into another youth development program, or continue in SILP for an additional year with prior approval by the Regional Administration.

C. Approval

Prior to acceptance into the program, the youth's worker shall submit the following materials to the Regional Administrator or designee:

1) Documentation of the youth's abilities as they relate to the eligibility requirements including observations from the worker and past caretaker(s) and current medical and dental examination results.

2) Current CFS 497 series which demonstrates the permanency planning goal of independence which identifies the specific planned SILP services and discharge date.

The Regional Administrator or designee shall determine the appropriateness of the referral and the availability of slots in SILP. The worker shall be notified of the decision within two (2) weeks of receipt of the material by the Regional Administrator or designee. When the request is denied, the basis for denial, as well as alternatives, are to be provided by the Regional Administrator or designee. When the request is approved the worker shall:

1) Initiate a referral to an agency with whom DCFS has a SILP contract, and

// 2) Upon acceptance by the agency and placement in SILP ensure that the agency completes a CFS 906-1 to reflect SILP (Service Code 0204) at the negotiated payment rate.

D. Service Planning

Upon initial entry into SILP a service plan (CFS 497) will be developed for the youth by the DCFS and supervising agency worker. The CFS 497 will be reviewed at six (6) month intervals in accordance with procedures 305, Client Service Planning.

The CFS 497 shall include:

1) A statement of a permanency goal of independent living and planned goal achievement date.

2) Specifications of services to be provided which include monthly living maintenance for the youth provided by the agency and individual or group counseling. Services which may additionally be included are: assistance in locating appropriate educational or vocational programs; assistance in improving competence in daily life skills; and employment related services (e.g., developing job interview skills, job finding).

3) A schedule of a minimum of twice monthly meetings between the youth and service provider; at least one meeting per month shall be in the youth's residence.

E. Monitoring

The service provider shall submit reports as required by the contract.

F. Financial Provision

1) Payment to the Youth. The supervising agency will provide the adolescent with a monthly allowance in accordance with contractual stipulations. The amount shall not exceed $200 monthly.

2) Start-up Expenses. Initial expenses related to setting up a household may be partially subsidized by DCFS. The adolescent will present an itemized list to the private agency who will request DCFS payment. An amount up to $100 may be authorized.

3) Medical and Dental Payments. Youth in SILP are ineligible for Medicaid. The Region shall issue the youth a pink medical card (CFS 933) in accordance with procedures 302 (Health Care Services).

G. Discharge from SILP

The service provider shall terminate the youth from SILP:

1) Upon demonstration by the adolescent that he is able to live independently without supervision.

2) When circumstances indicate that the adolescent could better be served in another youth development program.

3) When the adolescent, over the age of 18, fails to complete the tasks as agreed upon and identified on the CFS 497, Part II.

4) No later than 24 months after entry into SILP. The Regional Administrator must give prior written approval to continue an adolescent in SILP beyond 12 months.

DEPARTMENT SCHOLARSHIP PROGRAM

A. Description and Purpose

The Department Scholarship Program provides supplemental services and maintenance payments, except tuition, to adolescents for whom the Department is legally responsible who have been selected for the program by the DCFS Scholarship Committee. The purpose of the program is to ensure that those selected can earn a college or university bachelor's degree in four years.

B. Eligibility Requirements

Each year a maximum of twelve (12) students who have completed four years in an accredited high school may be selected as scholarship recipients. At least two of those selected shall be the children of veterans.

The Chairman of the Scholarship Committee will notify all DCFS offices of the deadline for submission of applications in the spring of each year.

Adolescents considered for scholarships must meet the following criteria:

1) Youth must be a high school graduate

and

2) The Department must have court ordered legal responsibility for the adolescent

and

3) The permanency goal for the youth must be independence

and

4) The youth must have submitted through their worker CFS-438, Scholarship Application (rev. 4/81) high school transcript, and ACT, SAT or equivalent aptitude scores

and

5) The youth must have an outstanding high school scholastic record, aptitude for and interest in higher education

and

6) The youth must have applied for other appropriate scholarships and benefits (e.g., Illinois State Scholarship Commission Grant, Basic Educational Opportunity Grant, Supplemental Educational Grant, Work Study and National Defense Student Loans and Social Security and Veterans Benefits)

and

7) The youth must be able to provide approximately one-third of his basic living costs from earned income, unearned income, scholarships or savings.

C. Approval

Department scholarships are awarded by a Scholarship Committee based upon applications submitted. Selection is based on scholastic record, aptitude, resources available to the youth and interest in higher education.

When the adolescent's worker is notified that an adolescent on his caseload has been awarded a Department Scholarship, the worker shall complete a child module to reflect the independent living situation and authorize payment in accordance with procedures 359, Authorized Child Care Payments.

D. Service Planning

A service plan (CFS 497) will be developed for each scholarship recipient and reviewed at the beginning of each quarter or semester, but minimally every six months in accordance with procedures 305, Client Service Planning.

The CFS 497 shall include:

1) A statement of a permanency goal of independent living and date of planned achievement.

2) Specifications of services to be provided including worker contact at least quarterly.

3) Specifications that the student will provide the worker with information concerning his progress, scholastic standing and earned or unearned income at the end of each quarter or semester, as applicable.

E. Monitoring

1) Verification of Scholastic Program. At the end of each quarter or semester the student shall provide the worker with documentation that grades acceptable to the college or university are being maintained and that a full academic schedule is being carried.

2) Materials to Scholarship Chairman. The worker shall send the quarter or semester grades to the scholarship chairman. When the student withdraws or is terminated from school the worker shall apprise the scholarship chairman immediately.

3) Worker Contacts. The worker shall contact the student at least quarterly to verify continuing school attendance and to provide whatever supportive counseling may be necessary.

F. Financial Provision

1) Tuition Waiver. If the student attends an Illinois state college or university and does not have a tuition scholarship from another

source, the scholarship chairman will request a tuition waiver available by statute.

2) Direct Payment to Youth. Department payments to the adolescent will be made by mail and may not exceed $200 monthly.

3) Start-Up Expenses. Initial expenses related to setting up a household may be partially subsidized by the Department (maximum $100) in accordance with procedures 359, Authorized Child Care Payments.

// 4) Start-Up Payment. The worker should start the Service Code 0701 payment to the student effective August 1st and, unless the student attends summer school, terminate the Service Code 0701 payment May 1st of each academic year. Payment may continue to the youth's caretaker through August to be terminated September 1st and payment may begin again to a caretaker May 1st.

// 5) Summer Payments. Service Code 0701 payment may continue beyond April 1st only when the student attends summer school. When the youth does not attend summer school, foster family home placement and payment start-up or YTP payment are to be considered unless the student can support himself during the summer months from earnings.

// 6) Medical and Dental Payments. Department scholarship youth are ineligble for Medicaid while receiving a Service Code 0701 payment. The Region shall issue the youth a pink medical card (CFS 933) in accordance with procedures 302 (Health Care Services). When legal responsibility is maintained by the Department and the youth returns to a foster home during the summer months the worker should complete and submit form CFS 1411, Eligibility I (parent and child's income) and CFS 1412, Eligibility II to reinstate Medicaid eligibility.

7. Fee and Book Payment. In addition to the monthly payment to the youth, the Department may, when the youth does not have sufficient resources and has documented such to the workers, pay for required school fees and text books out of the Children's Personal and Physical Maintenance budgetary line. Tuition shall not be paid by DCFS.

8. Guardianship Termination or Marriage. Termination of guardianship or marriage followed by guardianship termination does not terminate a four-year scholarship. The Department will continue to make monthly payments to the youth and a pink medical card continues to be issued.

G. Discharge from the Scholarship Program

// 1) Upon completion of four years in the scholarship program or securing of a bachelor's degree at an accelerated equivalent the worker shall terminate payment and close the child's case (see

AP#5 concerning closure). The worker shall also notify the scholarship chairman.

// 2) When the student, following selection as a scholarship student, fails to enroll in school, the worker shall notify the scholarship chairman, terminate any Service Code 0701 payment initiated and ensure that the adolescent is in another appropriate program or receiving appropriate services if DCFS maintains legal responsibility.

3) When the student, following enrollment in school, fails to achieve and maintain grade standards of the school, is dismissed for disciplinary reasons, or voluntarily withdraws without good cause, the worker shall notify the scholarship chairman for instructions regarding continuation or termination of the student's scholarship.

YOUTH EMPLOYMENT AND TRAINING PROGRAM

A. Description and Purpose

The Youth Employment and Training Program provides supplemental services to adolescent youth for whom the Department is legally responsible. The purpose of these services is to motivate and enable youth to attain economic independence and self-sufficiency.

The procedures that follow in Section B through G describe:

- The eligibility requirements of the program
- program participation
- the initial and ongoing service planning necessary to successfully guide a youth through the program and monitor the youth's progress
- financial provisions of the program
- termination of services

B. Eligibility Requirements

The caseworkers will utilize the following guide to determine the eligibility and suitability of youth for these employment and training services:

1) Age: 14-21 - Youth must be at least 14 years of age to be referred for assistance.

2) Employment Status: Youth referred should be either unemployed, or under-employed, i.e., employed part-time but seeking full-time employment.

3) School Status: Both in-school and out-of-school youth may be referred. Preference, however, should be given to out-of-school youth. Youth in school may be referred for the following kinds of assistance:

    a) part-time employment during school term;
    b) full-time or part-time employment in the summer;
    c) vocational and career counseling;
    d) vocational exploration;
    e) pre-employment and employment skills training;
    f) job-seeking skills training;
    g) vocational training;
    h) academic and vocational testing.

    Out-of-school youth may be referred for full-time employment, assistance in returning to school, and any or all of the above services.

4) Vocational Training: Youth over 14 and seeking vocational training, whether in an area vocational school, a community college, or special skills training school, should be referred.

5) Eligibility Criteria for CETA: The following categories of youth 14 and over are automatically eligible for CETA services:

   a) Youth on whose behalf payments are being made by the state;
   b) handicapped;
   c) receiving public assistance (e.g., AFDC, SSI).

   Wards who are living in the homes of their natural parents must meet CETA income requirements.

C. Program Participation

Participation in the program requires that the caseworker refer eligible youth to the employment and training liaison in the office. This person will meet with the caseworker and youth to discuss the alternatives for employment/training and incorporate an objective for the youth in his/her service plan (497).

D. Service Planning

An objective will be established for each youth and incorporated in a service plan (CFS 497). This objective will be developed in coordination with an appropriate employment and training agency that will be primarily responsible for helping the youth achieve economic independence. The CFS 497 will be reviewed at the beginning of each term (minimally every six months) for youth in any educational/vocational/employment program, and at least every six months for those youth who are not in school but who are employed. The CFS 497 shall include, but is not limited to:

1) A statement of a permanency goal;

2) An objective regarding employment and training to accomplish the goal and tasks to accomplish the objective;

3) Specifications of services to be provided;

4) A schedule of quarterly contacts with youth.

E. Monitoring

1) Verification of School Enrollment. Workers shall verify with the school, college, junior college or trade school the youth's acceptance and enrollment in their program and the financial aid package available to the youth at the beginning of each term. The youth shall submit to his caseworker a copy of his grade report to verify his academic progress at the completion of the first term of school. The worker shall request the school to notify DCFS if the youth drops out of school.

2) Verification of Employment. Workers shall verify with an employer the youth's job status, including attendance and income, during the first month of employment.

3) Worker Visits. The worker or service provider shall be in contact with the youth on a regular basis. A schedule of contacts should be developed and included in the Service Plan. This schedule should include visits to the worksite or at the worker's office. If the youth is in college or junior college, quarterly contacts shall be made.

4) Evaluation of Progress. The youth's progress shall be evaluated during the service planning case review. At that time an overall evaluation of progress toward the permanency goal and concomitant objectives will be conducted.

F. Financial Provision

Although the Department makes no direct payments for participation in employment and training activities, a youth referred to an employment and training agency may be receiving allowances paid at a rate of the minimum wage for each hour of classroom training, and possibly additional sums for transportation, clothing, books, tuition and fees. In addition the youth may be earning wages for subsidized or unsubsidized employment.

G. Termination of Services

Upon achievement of objectives as listed on 497 or age 21, whichever occurs first, services will be terminated.

Desired achievements demonstrated by the adolescent at the time of termination of services include:

- Economic Self-Sufficiency. In order to demonstrate competency in this area, the adolescent must have been working for six consecutive months with an adequate income level to support himself/herself. He/she must have arranged for medical insurance coverage.

- Adequate Housing in the Community. The youth must be currently residing in housing of an aceptable standard.

- Ability to Manage Resources. The youth shall have demonstrated an ability to budget money and time.

- Youth has achieved objectives and tasks set forth in the Service Plan (CFS 497).

APPENDIX A

FREQUENCY TABLES

INDEPENDENT LIVING FOR ADOLESCENTS
Table 1-1
COUNTY AND STATE (SITE)

		SITE			
COUNTY AND STATE	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
1	84 27.5	84 100.0	0	0	0
2	81 26.6	0	81 100.0	0	0
3	67 22.0	0	0	67 100.0	0
4	73 23.9	0	0	0	73 100.0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

WESTAT, INC. 7/15/86

INDEPENDENT LIVING FOR ADOLESCENTS
Table 2-1
QA-1
SEX

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SEX					
MALE	165 54.1	36 42.9	52 64.2	32 47.8	45 61.6
FEMALE	137 44.9	48 57.1	28 34.6	35 52.2	26 35.6
MISSING DATA	3 1.0	0	1 1.2	0	2 2.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 3-1
QA2-AGE
AGE OF RESPONDENT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
AGE IN YEARS					
16	31 10.2	19 22.6	6 7.4	4 6.0	2 2.7
17	75 24.6	19 22.6	28 34.6	12 17.9	16 21.9
18	115 37.7	38 45.2	30 37.0	33 49.3	14 19.2
19	45 14.8	6 7.1	12 14.8	9 13.4	18 24.7
20	16 5.2	2 2.4	1 1.2	6 9.0	7 9.6
21	21 6.9	0	3 3.7	2 3.0	16 21.9
MISSING DATA	2 .7	0	1 1.2	1 1.5	0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 4-1
QA-3
RACE-ETHNICITY OF RESPONDENT

	TOTAL	SITE 01	 02	 03	 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
RACE-ETHNICITY					
WHITE	198 64.9	64 76.2	59 72.8	41 61.2	34 46.6
HISPANIC	19 6.2	7 8.3	9 11.1	0	3 4.1
BLACK NOT HISPANIC	67 22.0	4 4.8	5 6.2	25 37.3	33 45.2
ASIAN OR PACIFIC ISLANDER	2 .7	0	0	0	2 2.7
AMERICAN INDIAN OR ALASKAN NATIVE	3 1.0	2 2.4	1 1.2	0	0
MIXED RACED	7 2.3	5 6.0	1 1.2	1 1.5	0
MISSING DATA	9 3.0	2 2.4	6 7.4	0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 5-1
QA-4
EDUCATIONAL LEVEL ATTAINED

		SITE			
	TOTAL	01	02	03.	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
EDUCATION LEVEL ATTAINED					
LESS THAN HIGH SCHOOL	17	7	3	2	5
	5.6	8.3	3.7	3.0	6.8
SOME HIGH SCHOOL	159	51	40	38	30
	52.1	60.7	49.4	56.7	41.1
COMPLETED HIGH SCHOOL	52	13	12	13	14
	17.0	15.5	14.8	19.4	19.2
COMPLETED G.E.D.	19	4	8	2	5
	6.2	4.8	9.9	3.0	6.8
VOCATIONAL OR TRADE SCHOOL	16	1	5	3	7
	5.2	1.2	6.2	4.5	9.6
SOME COLLEGE	12	2	2	2	6
	3.9	2.4	2.5	3.0	8.2
MISSING DATA	30	6	11	7	6
	9.8	7.1	13.6	10.4	8.2
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 6-1
QA-5
PRESENCE OF DISABLING CONDITIONS
NO DISABLING CONDITIONS

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
NO KNOWN DISABLING CONDITIONS					
YES	166	38	55	40	33
	54.4	45.2	67.9	59.7	45.2
NO	131	44	23	25	39
	43.0	52.4	28.4	37.3	53.4
MISSING DATA	8	2	3	2	1
	2.6	2.4	3.7	3.0	1.4
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 7-1
QA-5
PRESENCE OF DISABLING CONDITIONS
MENTAL RETARDATION

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
MENTAL RETARDATION					
YES	23 7.5	4 4.8	2 2.5	5 7.5	12 16.4
NO	274 89.8	78 92.9	76 93.8	60 89.6	60 82.2
MISSING DATA	8 2.6	2 2.4	3 3.7	2 3.0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 8-1
QA-5
PRESENCE OF DISABLING CONDITIONS
EMOTIONAL DISTURBANCE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
EMOTIONAL DISTURBANCE					
YES	88 28.9	37 44.0	17 21.0	12 17.9	22 30.1
NO	209 68.5	45 53.6	61 75.3	53 79.1	50 68.5
MISSING DATA	8 2.6	2 2.4	3 3.7	2 3.0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 9-1
QA-5
PRESENCE OF DISABLING CONDITIONS
SPECIFIC LEARNING DISABILITY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SPECIFIC LEARNING DISABILITY					
YES	30 9.8	6 7.1	1 1.2	7 10.4	16 21.9
NO	267 87.5	76 90.5	77 95.1	58 86.6	56 76.7
MISSING DATA	8 2.6	2 2.4	3 3.7	2 3.0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

WESTAT, INC. 7/15/86

INDEPENDENT LIVING FOR ADOLESCENTS
Table 10-1
QA-5
PRESENCE OF DISABLING CONDITIONS
HEARING, SPEECH, OR SIGHT IMPAIRMENT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
HEARING, SPEECH OR SIGHT IMPAIRMENT					
YES	11 3.6	2 2.4	2 2.5	3 4.5	4 5.5
NO	286 93.8	80 95.2	76 93.8	62 92.5	68 93.2
MISSING DATA	8 2.6	2 2.4	3 3.7	2 3.0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 11-1
QA-5
PRESENCE OF DISABLING CONDITIONS
PHYSICAL DISABILITY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
PHYSICAL DISABILITY					
YES	7 2.3	6 7.1	0	0	1 1.4
NO	290 95.1	76 90.5	78 96.3	65 97.0	71 97.3
MISSING DATA	8 2.6	2 2.4	3 3.7	2 3.0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 12-1
QA-5
PRESENCE OF DISABLING CONDITIONS
OTHER CLINICALLY DIAGNOSED CONDITIONS

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
OTHER CLINICALLY DIAGNOSED CONDITIONS					
YES	11 3.6	7 8.3	2 2.5	1 1.5	1 1.4
NO	286 93.8	75 89.3	76 93.8	64 95.5	71 97.3
MISSING DATA	8 2.6	2 2.4	3 3.7	2 3.0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 13-1
QA6JOB
DID RESPONDENT HOLD A JOB WHILE IN SUBSTITUTE CARE ?
DERIVED VARIABLE
TOTAL ADOLESCENTS; ALL; NOSIGMA NOSZR

		SITE			
	TOTAL	01	02	03	04
HELD JOB					
YES	119 39.0	41 48.8	16 19.8	33 49.3	29 39.7
NO	73 23.9	35 41.7	22 27.2	10 14.9	6 8.2
MISSING DATA	113 37.0	8 9.5	43 53.1	24 35.8	38 52.1
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 14-1
QA-6A
JOBS HELD WHILE IN CARE:
LAST JOB HELD WHILE IN CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
JOBS HELD WHILE IN FOSTER CARE (LAST JOB)					
JOB DESCRIPTION					
AIRCRAFT MAINTENANCE	1	0	0	1	0
	.3			1.5	
ANIMAL WORKER	1	1	0	0	0
	.3	1.2			
BABY SITTER CHILD CARE	1	1	0	0	0
	.3	1.2			
BUS BOY	5	3	2	0	0
	1.6	3.6	2.5		
CAR WASHER	2	1	1	0	0
	.7	1.2	1.2		
CASHIER	3	1	0	0	2
	1.0	1.2			2.7
CEMENT LAYER	1	0	0	1	0
	.3			1.5	
CLERK (STORE)	2	1	0	1	0
	.7	1.2		1.5	
CLERICAL	1	1	0	0	0
	.3	1.2			
CLERICAL	1	0	0	1	0
	.3			1.5	

Continued...

INDEPENDENT LIVING FOR ADOLESCENTS
Table 14-1
QA-6A
JOBS HELD WHILE IN CARE:
LAST JOB HELD WHILE IN CARE

		SITE			
	TOTAL	01	02	03	04
COMPUTER OPERATOR	1	1	0	0	0
	.3	1.2			
CONTRUCTION WORKER	2	2	0	0	0
	.7	2.4			
COOK	6	1	0	3	2
	2.0	1.2		4.5	2.7
CUSTODIAL	1	0	0	0	1
	.3				1.4
DAY CARE WORKER	3	2	0	1	0
	1.0	2.4		1.5	
DELIVERY PERSON	1	0	0	1	0
	.3			1.5	
DISH WASHER	3	2	0	0	1
	1.0	2.4			1.4
FACTORY WORKER	1	0	0	1	0
	.3			1.5	
FLOWER GIRL	1	1	0	0	0
	.3	1.2			
HOSPITAL CLERK	1	0	0	1	0
	.3			1.5	
LAUNDRY WORKER	1	0	0	1	0
	.3			1.5	
MAID	1	1	0	0	0
	.3	1.2			
MAINTENANCE	2	0	2	0	0
	.7		2.5		
MILITARY SERVICE	1	0	0	0	1
	.3				1.4

Continued...

INDEPENDENT LIVING FOR ADOLESCENTS
Table 14-1
QA-6A
JOBS HELD WHILE IN CARE:
LAST JOB HELD WHILE IN CARE

		SITE			
	TOTAL	01	02	03	04
PAPER CARRIER	1	0	1	0	0
	.3		1.2		
PIZZA DELIVERY	1	1	0	0	0
	.3	1.2			
PRINTER	1	0	0	0	1
	.3				1.4
RECREATIONAL AIDE	6	0	0	3	3
	2.0			4.5	4.1
RECEPTIONIST	2	1	1	0	0
	.7	1.2	1.2		
SALES WORKER	3	0	0	0	3
	1.0				4.1
SECURITY GUARD	1	0	0	0	1
	.3				1.4
SERVICE WORKERS (FAST FOODS)	9	2	0	1	6
	3.0	2.4		1.5	8.2
SKATE GUARD	1	0	0	1	0
	.3			1.5	
STOCK WORKER	2	0	0	2	0
	.7			3.0	
TELEPHONE SOLICITING	1	1	0	0	0
	.3	1.2			
TICKET AGENT	1	0	0	1	0
	.3			1.5	
WAITER	3	0	1	1	1
	1.0		1.2	1.5	1.4
WELDER	2	1	0	1	0
	.7	1.2		1.5	

Continued...

INDEPENDENT LIVING FOR ADOLESCENTS
Table 14-1
QA-6A
JOBS HELD WHILE IN CARE:
LAST JOB HELD WHILE IN CARE

		SITE			
	TOTAL	01	02	03	04
NO JOB REPORTED	73 23.9	35 41.7	22 27.2	10 14.9	6 8.2
JOB-NOT SPECIFIED	42 13.8	16 19.0	8 9.9	11 16.4	7 9.6
MISSING DATA	113 37.0	8 9.5	43 53.1	24 35.8	38 52.1
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 15-1
QA-WK
JOBS HELD WHILE IN CARE
HOURS PER WEEK FOR LAST JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
HOURS PER WEEK					
10 OR LESS	2	0	1	0	1
	.7		1.2		1.4
11 - 20	20	2	2	14	2
	6.6	2.4	2.5	20.9	2.7
21 - 30	8	3	1	3	1
	2.6	3.6	1.2	4.5	1.4
31 - 40	9	1	2	5	1
	3.0	1.2	2.5	7.5	1.4
NO JOB REPORTED	73	35	22	10	6
	23.9	41.7	27.2	14.9	8.2
JOB-NOT SPECIFIED	1	1	0	0	0
	.3	1.2			
MISSING DATA	192	42	53	35	62
	63.0	50.0	65.4	52.2	84.9
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 16-1
QA-WAGE
JOBS HELD WHILE IN CARE
HOURLY PAY FOR LAST JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
HOURLY PAY					
$3.35 OR LESS	23 7.5	5 6.0	4 4.9	13 19.4	1 1.4
$3.36 TO $4.00	8 2.6	0	2 2.5	6 9.0	0
$4.01 TO $5.00	4 1.3	1 1.2	0	2 3.0	1 1.4
OVER $5.00	3 1.0	0	1 1.2	1 1.5	1 1.4
NO JOB REPORTED	73 23.9	35 41.7	22 27.2	10 14.9	6 8.2
MISSING DATA	194 63.6	43 51.2	52 64.2	35 52.2	64 87.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 17-1
QA-6B
JOBS HELD WHILE IN CARE:
1ST PREVIOUS JOB

	TOTAL	SITE 01	02	03	04
TOTAL ADOLESCENTS	12 100.0	0	0	12 100.0	0
JOBS HELD WHILE IN FOSTER CARE (LAST JOB)					
JOB DESCRIPTION					
COOK	2 16.7	0	0	2 16.7	0
DAY CARE WORKER	1 8.3	0	0	1 8.3	0
HOSPITAL HOUSEKEEPER	1 8.3	0	0	1 8.3	0
ODD JOBS	1 8.3	0	0	1 8.3	0
OFFICE AIDE	1 8.3	0	0	1 8.3	0
RECREATIONAL AIDE	1 8.3	0	0	1 8.3	0
SALES WORKER	1 8.3	0	0	1 8.3	0
SERVICE WORKERS (FAST FOODS)	1 8.3	0	0	1 8.3	0
TUTOR	1 8.3	0	0	1 8.3	0
MISSING DATA	2 16.7	0	0	2 16.7	0

Continued...

INDEPENDENT LIVING FOR ADOLESCENTS
Table 17-1
QA-6B
JOBS HELD WHILE IN CARE:
1ST PREVIOUS JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL	12	0	0	12	0
	100.0			100.0	

INDEPENDENT LIVING FOR ADOLESCENTS
Table 18-1
QB-WK
JOBS HELD WHILE IN CARE
HOURS PER WEEK FOR FIRST PREVIOUS JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	12 100.0	0	0	12 100.0	0
HOURS PER WEEK					
10 OR LESS	1 8.3	0	0	1 8.3	0
11 - 20	6 50.0	0	0	6 50.0	0
21 - 30	3 25.0	0	0	3 25.0	0
MISSING DATA	2 16.7	0	0	2 16.7	0
TOTAL	12 100.0	0	0	12 100.0	0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 19-1
QB-WAGE
JOBS HELD WHILE IN CARE
HOURLY PAY FOR LAST JOB FOR FIRST PREVIOUS JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	12 100.0	0	0	12 100.0	0
HOURLY PAY					
$3.35 OR LESS	6 50.0	0	0	6 50.0	0
$3.36 TO $4.00	4 33.3	0	0	4 33.3	0
MISSING DATA	2 16.7	0	0	2 16.7	0
TOTAL	12 100.0	0	0	12 100.0	0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 20-1
QA-6C
JOBS HELD WHILE IN CARE:
2ND PREVIOUS JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	10 100.0	0	0	10 100.0	0
JOBS HELD WHILE IN FOSTER CARE (LAST JOB)					
JOB DESCRIPTION					
BABY SITTER CHILD CARE	1 10.0	0	0	1 10.0	0
CLASSROOM AIDE	1 10.0	0	0	1 10.0	0
CUSTODIAL	1 10.0	0	0	1 10.0	0
ODD JOBS	3 30.0	0	0	3 30.0	0
SERVICE WORKERS (FAST FOODS)	1 10.0	0	0	1 10.0	0
TUTOR	2 20.0	0	0	2 20.0	0
WORK STUDY PROGRAM	1 10.0	0	0	1 10.0	0
TOTAL	10 100.0	0	0	10 100.0	0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 21-1
QC-WK
JOBS HELD WHILE IN CARE
HOURS PER WEEK FOR SECOND PREVIOUS JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	10 100.0	0	0	10 100.0	0
HOURS PER WEEK					
10 OR LESS	4 40.0	0	0	4 40.0	0
11 - 20	2 20.0	0	0	2 20.0	0
21 - 30	4 40.0	0	0	4 40.0	0
TOTAL	10 100.0	0	0	10 100.0	0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 22-1
QC-WAGE
JOBS HELS WHILE IN CARE
HOURLY PAY FOR SECOND PREVIOUS JOB

	TOTAL	SITE			
		01	02	03	04
TOTAL ADOLESCENTS	10	0	0	10	0
	100.0			100.0	
HOURLY PAY					
$3.35 OR LESS	9	0	0	9	0
	90.0			90.0	
$3.36 TO $4.00	1	0	0	1	0
	10.0			10.0	
TOTAL	10	0	0	10	0
	100.0			100.0	

INDEPENDENT LIVING FOR ADOLESCENTS
Table 23-1
Q-B1A
LOCATION OF PARENTS
LOCATION OF BIOLOGICAL MOTHER
AT TIME OF INITIAL ENTRY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
LOCATION OF BIOLOGICAL MOTHER:					
IN COUNTY	206	58	53	43	52
	67.5	69.0	65.4	64.2	71.2
IN COUNTY OUT OF STATE	19	2	3	6	8
	6.2	2.4	3.7	9.0	11.0
OUT OF STATE	22	10	5	2	5
	7.2	11.9	6.2	3.0	6.8
WHEREABOUTS UNKNOWN	15	4	5	4	2
	4.9	4.8	6.2	6.0	2.7
DECEASED	27	8	5	9	5
	8.9	9.5	6.2	13.4	6.8
NOT APPLICABLE	1	0	0	0	1
	.3				1.4
MISSING DATA	15	2	10	3	0
	4.9	2.4	12.3	4.5	
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 24-1
Q-B1B
LOCATION OF PARENTS
LOCATION OF BIOLOGICAL MOTHER
AT TIME OF DISCHARGE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
LOCATION OF BIOLOGICAL MOTHER:					
IN COUNTY	152	44	46	27	35
	49.8	52.4	56.8	40.3	47.9
IN COUNTY OUT OF STATE	23	2	5	11	5
	7.5	2.4	6.2	16.4	6.8
OUT OF STATE	30	16	5	3	6
	9.8	19.0	6.2	4.5	8.2
WHEREABOUTS UNKNOWN	29	8	7	7	7
	9.5	9.5	8.6	10.4	9.6
DECEASED	38	8	7	11	12
	12.5	9.5	8.6	16.4	16.4
NOT APPLICABLE	1	0	0	0	1
	.3				1.4
MISSING DATA	32	6	11	8	7
	10.5	7.1	13.6	11.9	9.6
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 25-1
Q-B2A
LOCATION OF PARENTS
LOCATION OF BIOLOGICAL FATHER
AT TIME OF INITIAL ENTRY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
LOCATION OF BIOLOGICAL FATHER:					
IN COUNTY	135	42	34	26	33
	44.3	50.0	42.0	38.8	45.2
IN COUNTY OUT OF STATE	16	1	7	4	4
	5.2	1.2	8.6	6.0	5.5
OUT OF STATE	37	12	10	6	9
	12.1	14.3	12.3	9.0	12.3
WHEREABOUTS UNKNOWN	47	16	6	12	13
	15.4	19.0	7.4	17.9	17.8
DECEASED	21	5	3	9	4
	6.9	6.0	3.7	13.4	5.5
NOT APPLICABLE	10	2	1	1	6
	3.3	2.4	1.2	1.5	8.2
MISSING DATA	39	6	20	9	4
	12.8	7.1	24.7	13.4	5.5
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 26-1
Q-B2B
LOCATION OF PARENTS
LOCATION OF BIOLOGICAL FATHER
AT TIME OF DISCHARGE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
LOCATION OF BIOLOGICAL FATHER:					
IN COUNTY	94	29	30	14	21
	30.8	34.5	37.0	20.9	28.8
IN COUNTY OUT OF STATE	22	2	8	9	3
	7.2	2.4	9.9	13.4	4.1
OUT OF STATE	42	16	10	7	9
	13.8	19.0	12.3	10.4	12.3
WHEREABOUTS UNKNOWN	62	19	6	17	20
	20.3	22.6	7.4	25.4	27.4
DECEASED	29	7	4	12	6
	9.5	8.3	4.9	17.9	8.2
NOT APPLICABLE	10	2	1	1	6
	3.3	2.4	1.2	1.5	8.2
MISSING DATA	46	9	22	7	8
	15.1	10.7	27.2	10.4	11.0
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 27-1
Q-B3A
MARITAL STATUS OF BIOLOGICAL PARENTS AT TIME OF INITIAL ENTRY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
MARITAL STATUS					
MARRIED AND LIVING TOGETHER	71	23	21	8	19
	23.3	27.4	25.9	11.9	26.0
MARRIED AND NOT LIVING TOGETHER	22	8	1	2	11
	7.2	9.5	1.2	3.0	15.1
LEGALLY SEPARATED	8	2	1	0	5
	2.6	2.4	1.2		6.8
DIVORCED	78	24	27	20	7
	25.6	28.6	33.3	29.9	9.6
LIVING TOGETHER NOT MARRIED	5	2	0	2	1
	1.6	2.4		3.0	1.4
NEVER MARRIED NOT LIVING TOGETHER	33	2	2	12	17
	10.8	2.4	2.5	17.9	23.3
ONE OR BOTH PARENTS DECEASED	40	11	7	17	5
	13.1	13.1	8.6	25.4	6.8
OTHER	2	2	0	0	0
	.7	2.4			
UNKNOWN	46	10	22	6	8
	15.1	11.9	27.2	9.0	11.0
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 28-1
Q-B3B
MARITAL STATUS OF BIOLOGICAL PARENTS
AT TIME OF DISCHARGE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
MARITAL STATUS					
MARRIED AND LIVING TOGETHER	46	18	16	2	10
	15.1	21.4	19.8	3.0	13.7
MARRIED AND NOT LIVING TOGETHER	17	4	2	5	6
	5.6	4.8	2.5	7.5	8.2
LEGALLY SEPARATED	9	2	1	0	6
	3.0	2.4	1.2		8.2
DIVORCED	88	26	28	23	11
	28.9	31.0	34.6	34.3	15.1
LIVING TOGETHER NOT MARRIED	3	1	0	1	1
	1.0	1.2		1.5	1.4
NEVER MARRIED NOT LIVING TOGETHER	27	3	2	8	14
	8.9	3.6	2.5	11.9	19.2
ONE OR BOTH PARENTS DECEASED	50	11	7	22	10
	16.4	13.1	8.6	32.8	13.7
OTHER	3	3	0	0	0
	1.0	3.6			
UNKNOWN	62	16	25	6	15
	20.3	19.0	30.9	9.0	20.5
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 29-1
Q-B4A
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
MOTHER

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
MOTHER					
YES	206	57	54	39	56
	67.5	67.9	66.7	58.2	76.7
NO	84	25	21	25	13
	27.5	29.8	25.9	37.3	17.8
MISSING DATA	15	2	6	3	4
	4.9	2.4	7.4	4.5	5.5
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 30-1
Q-B4B
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
FATHER

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
FATHER					
YES	125 41.0	44 52.4	37 45.7	19 28.4	25 34.2
NO	163 53.4	38 45.2	38 46.9	45 67.2	42 57.5
MISSING DATA	17 5.6	2 2.4	6 7.4	3 4.5	6 8.2
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 31-1
Q-B4C
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
STEP-PARENT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
STEP PARENT					
YES	69	16	17	22	14
	22.6	19.0	21.0	32.8	19.2
NO	216	66	58	42	50
	70.8	78.6	71.6	62.7	68.5
MISSING DATA	20	2	6	3	9
	6.6	2.4	7.4	4.5	12.3
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 32-1
Q-B4D
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
SIBLING (INCLUDING HALF SIBLING)

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SIBLING					
YES	195 63.9	58 69.0	49 60.5	43 64.2	45 61.6
NO	92 30.2	24 28.6	26 32.1	21 31.3	21 28.8
MISSING DATA	18 5.9	2 2.4	6 7.4	3 4.5	7 9.6
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 33-1
Q-B4E
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
OTHER RELATED CHILD

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
OTHER RELATED CHILD					
YES	18 5.9	7 8.3	3 3.7	8 11.9	0
NO	266 87.2	75 89.3	72 88.9	56 83.6	63 86.3
MISSING DATA	21 6.9	2 2.4	6 7.4	3 4.5	10 13.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 34-1
Q-B4F
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
UNRELATED CHILD (INCLUDE STEP SIBLINGS)

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
UNRELATED CHILD					
YES	16	4	3	3	6
	5.2	4.8	3.7	4.5	8.2
NO	268	78	72	61	57
	87.9	92.9	88.9	91.0	78.1
MISSING DATA	21	2	6	3	10
	6.9	2.4	7.4	4.5	13.7
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 35-1
Q-B4G
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
ADULT-RELATIVES, NON PARENTAL

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
ADULT RELATIVES					
YES	35 11.5	9 10.7	5 6.2	13 19.4	8 11.0
NO	249 81.6	73 86.9	70 86.4	51 76.1	55 75.3
MISSING DATA	21 6.9	2 2.4	6 7.4	3 4.5	10 13.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 36-1
Q-B4H
RELATIONSHIP TO YOUTH OF ALL PEOPLE WHO NORMALLY LIVED IN THE YOUTH'S HOUSEHOLD AT TIME OF ENTRY:
ADULTS, UNRELATED

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
ADULTS UNRELATED					
YES	27 8.9	8 9.5	7 8.6	7 10.4	5 6.8
NO	257 84.3	74 88.1	68 84.0	57 85.1	58 79.5
MISSING DATA	21 6.9	2 2.4	6 7.4	3 4.5	10 13.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 37-1
Q-B5A
FAMILY SOURCE(S) OF INCOME
AT TIME OF INITIAL ENTRY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SOURCES OF SUPPORT					
SELF-SUPPORT	139 45.6	45 53.6	37 45.7	32 47.8	25 34.2
AFDC	50 16.4	5 6.0	8 9.9	13 19.4	24 32.9
SOCIAL SECURITY	26 8.5	9 10.7	5 6.2	8 11.9	4 5.5
SUPPLEMENTAL SECURITY INCOME (SSI)	13 4.3	7 8.3	2 2.5	1 1.5	3 4.1
ALIMONY OR CHILD SUPPORT	2 .7	1 1.2	1 1.2	0	0
VETERAN'S BENEFITS	5 1.6	4 4.8	0	1 1.5	0
RELATIVES OR FRIENDS	3 1.0	1 1.2	0	1 1.5	1 1.4
NONE	8 2.6	4 4.8	2 2.5	0	2 2.7
OTHER	7 2.3	5 6.0	0	1 1.5	1 1.4
MISSING DATA	79 25.9	22 26.2	26 32.1	14 20.9	17 23.3
TOTAL	332 108.9	103 122.6	81 100.0	71 106.0	77 105.5

INDEPENDENT LIVING FOR ADOLESCENTS
Table 38-1
Q-B5B
FAMILY SOURCE(S) OF INCOME
AT TIME OF DISCHARGE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SOURCES OF SUPPORT					
SELF-SUPPORT	111 36.4	29 34.5	35 43.2	31 46.3	16 21.9
AFDC	12 3.9	0	5 6.2	2 3.0	5 6.8
SOCIAL SECURITY	19 6.2	2 2.4	4 4.9	10 14.9	3 4.1
SUPPLEMENTAL SECURITY INCOME (SSI)	12 3.9	3 3.6	1 1.2	2 3.0	6 8.2
ALIMONY OR CHILD SUPPORT	1 .3	0	1 1.2	0	0
VETERAN'S BENEFITS	2 .7	2 2.4	0	0	0
RELATIVES OR FRIENDS	6 2.0	0	0	5 7.5	1 1.4
NONE	28 9.2	17 20.2	5 6.2	3 4.5	3 4.1
OTHER	2 .7	0	0	2 3.0	0
MISSING DATA	124 40.7	37 44.0	30 37.0	16 23.9	41 56.2
TOTAL	317 103.9	90 107.1	81 100.0	71 106.0	75 102.7

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 39-1
QC-2
DATE OF YOUTH FIRST PLACEMENT IN SUBSTITUTE CARE

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
DATE OF FIRST PLACEMENT					
JAN 1964/DEC 1969	30 9.8	1 1.2	1 1.2	5 7.5	23 31.5
JAN 1970/DEC 1974	23 7.5	5 6.0	2 2.5	8 11.9	8 11.0
JAN 1975/DEC 1979	45 14.8	13 15.5	9 11.1	8 11.9	15 20.5
JAN 1980/DEC 1981	53 17.4	17 20.2	14 17.3	16 23.9	6 8.2
JAN 1982/DEC 1983	94 30.8	32 38.1	27 33.3	22 32.8	13 17.8
JAN 1984/JUL 1985	55 18.0	15 17.9	26 32.1	6 9.0	8 11.0
DON'T KNOW	1 .3	0	1 1.2	0	0
MISSING DATA	4 1.3	1 1.2	1 1.2	2 3.0	0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 40-1
QC-3
DATE OF YOUTH'S MOST RECENT PLACEMENT IN SUBSTITUTE CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	44	7	14	13	10
	100.0	100.0	100.0	100.0	100.0
DATE OF MOST RECENT PLACEMENT					
JAN 1970/DEC 1974	2	0	0	1	1
	4.5			7.7	10.0
JAN 1975/DEC 1980	8	1	0	4	3
	18.2	14.3		30.8	30.0
JAN 1981/DEC 1982	7	2	1	2	2
	15.9	28.6	7.1	15.4	20.0
JAN 1983/JAN 1986	22	3	11	5	3
	50.0	42.9	78.6	38.5	30.0
MISSING DATA	4	1	2	1	0
	9.1	14.3	14.3	7.7	
TOTAL	43	7	14	13	9
	97.7	100.0	100.0	100.0	90.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 41-1
CASE HISTORY DATA
QC-5
PRIMARY REASON FOR PLACEMENT
INITIAL ENTRY

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
YOUTH'S CONDUCT OR CONDITION					
BEHAVIOR PROBLEM	16	3	6	2	5
	5.2	3.6	7.4	3.0	6.8
PARENT-CARETAKER CONDUCT, CONDITION OR ABSENCE					
VALIDATED REPORT OF CHILD ABUSE	36	11	10	8	7
	11.8	13.1	12.3	11.9	9.6
VALIDATED REPORT OF CHILD NEGLECT	57	13	4	16	24
	18.7	15.5	4.9	23.9	32.9
SEXUAL ABUSE	40	21	10	8	1
	13.1	25.0	12.3	11.9	1.4
FAMILY INTERACTION PROBLEM	38	7	24	2	5
	12.5	8.3	29.6	3.0	6.8
PARENT ILLNESS OR DISABILITY	10	2	2	5	1
	3.3	2.4	2.5	7.5	1.4
PARENT SUBSTANCE ABUSE	8	0	2	5	1
	2.6		2.5	7.5	1.4
PARENT TEMPORARY ABSENCE	7	1	2	0	4
	2.3	1.2	2.5		5.5

INDEPENDENT LIVING FOR ADOLESCENTS
Table 41-1
CASE HISTORY DATA
QC-5
PRIMARY REASON FOR PLACEMENT
INITIAL ENTRY

		SITE			
	TOTAL	01	02	03	04
PARENT DEATH	6	3	0	2	1
	2.0	3.6		3.0	1.4
PARENT UNABLE OR UNWILLING TO CARE	73	21	15	16	21
	23.9	25.0	18.5	23.9	28.8
RELINQUISHMENT OF PARENTAL RIGHTS	5	1	0	1	3
	1.6	1.2		1.5	4.1
OTHER	1	0	0	1	0
	.3			1.5	
REASONS UNKNOWN OR NOT REPORTED	8	1	6	1	0
	2.6	1.2	7.4	1.5	
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 42-1
CASE HISTORY DATA
QC-5B
PRIMARY REASON FOR PLACEMENT
SECOND ENTRY

	TOTAL	SITE 01	 02	 03	 04
TOTAL ADOLESCENTS	44 100.0	7 100.0	14 100.0	13 100.0	10 100.0
YOUTH'S CONDUCT OR CONDITION					
BEHAVIOR PROBLEM	3 6.8	2 28.6	0	1 7.7	0
PARENT-CARETAKER CONDUCT, CONDITION OR ABSENCE					
VALIDATED REPORT OF CHILD ABUSE	3 6.8	0	1 7.1	2 15.4	0
VALIDATED REPORT OF CHILD NEGLECT	4 9.1	1 14.3	1 7.1	0	2 20.0
SEXUAL ABUSE	1 2.3	0	0	1 7.7	0
FAMILY INTERACTION PROBLEM	5 11.4	0	2 14.3	1 7.7	2 20.0
PARENT ILLNESS OR DISABILITY	1 2.3	1 14.3	0	0	0
PARENT SUBSTANCE ABUSE	3 6.8	0	0	2 15.4	1 10.0
PARENT DEATH	2 4.5	0	0	1 7.7	1 10.0

Continued...

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 42-1
CASE HISTORY DATA
QC-5B
PRIMARY REASON FOR PLACEMENT
SECOND ENTRY

		SITE			
	TOTAL	01	02	03	04
PARENT UNABLE OR UNWILLING TO CARE	11	2	3	2	4
	25.0	28.6	21.4	15.4	40.0
REASONS UNKNOWN OR NOT REPORTED	11	1	7	3	0
	25.0	14.3	50.0	23.1	
TOTAL	44	7	14	13	10
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 43-1
QC-6
LENGTH OF TIME YOUTH WAS IN SUBSTITUTE CARE
INTIAL PLACEMNT ENTRY DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
INITIAL ENTRY DATE					
JAN 1964/DEC 1969	30	1	1	5	23
	9.8	1.2	1.2	7.5	31.5
JAN 1970/DEC 1974	23	5	2	8	8
	7.5	6.0	2.5	11.9	11.0
JAN 1975/DEC 1979	45	13	9	8	15
	14.8	15.5	11.1	11.9	20.5
JAN 1980/DEC 1981	53	17	14	16	6
	17.4	20.2	17.3	23.9	8.2
JAN 1982/DEC 1983	94	32	27	22	13
	30.8	38.1	33.3	32.8	17.8
JAN 1984/JAN 1986	55	15	26	6	8
	18.0	17.9	32.1	9.0	11.0
DON'T KNOW	1	0	1	0	0
	.3		1.2		
MISSING DATA	4	1	1	2	0
	1.3	1.2	1.2	3.0	
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 44-1
QC-6
LENGTH OF TIME YOUTH WAS IN SUBSTITUTE CARE
INTIAL PLACEMENT EXIT DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
INITIAL EXIT DATE					
JAN 1964/DEC 1969	2	0	0	0	2
	.7				2.7
JAN 1970/DEC 1974	5	0	0	3	2
	1.6			4.5	2.7
JAN 1975/DEC 1979	8	1	2	2	3
	2.6	1.2	2.5	3.0	4.1
JAN 1980/DEC 1981	9	2	3	4	0
	3.0	2.4	3.7	6.0	
JAN 1982/DEC 1983	20	3	9	5	3
	6.6	3.6	11.1	7.5	4.1
JAN 1984/JAN 1986	258	77	65	53	63
	84.6	91.7	80.2	79.1	86.3
DON'T KNOW	1	0	1	0	0
	.3		1.2		
MISSING DATA	2	1	1	0	0
	.7	1.2	1.2		
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 45-1
QC-6
LENGTH OF TIME YOUTH WAS IN SUBSTITUTE CARE
SECOND PLACEMENT ENTRY DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	44 100.0	7 100.0	14 100.0	13 100.0	10 100.0
SECOND ENTRY DATE					
JAN 1964/DEC 1969	2 4.5	0	0	0	2 20.0
JAN 1970/DEC 1974	2 4.5	0	0	1 7.7	1 10.0
JAN 1975/DEC 1979	5 11.4	0	0	2 15.4	3 30.0
JAN 1980/DEC 1981	5 11.4	1 14.3	0	4 30.8	0
JAN 1982/DEC 1983	18 40.9	4 57.1	8 57.1	5 38.5	1 10.0
JAN 1984/JUL 1985	12 27.3	2 28.6	6 42.9	1 7.7	3 30.0
TOTAL	44 100.0	7 100.0	14 100.0	13 100.0	10 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 46-1
QC-6
LENGTH OF TIME YOUTH WAS IN SUBSTITUTE CARE
SECOND PLACEMENT EXIT DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	44	7	14	13	10
	100.0	100.0	100.0	100.0	100.0
SECOND EXIT DATE					
JAN 1964/DEC 1969	1	0	0	0	1
	2.3				10.0
JAN 1982/DEC 1983	7	0	3	4	0
	15.9		21.4	30.8	
JAN 1984/JUL 1985	36	7	11	9	9
	81.8	100.0	78.6	69.2	90.0
TOTAL	44	7	14	13	10
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 47-1
QC-6
LENGTH OF TIME YOUTH WAS IN SUBSTITUTE CARE
THIRD PLACEMENT ENTRY DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	9	1	4	3	1
	100.0	100.0	100.0	100.0	100.0
THIRD ENTRY DATE					
JAN 1980/DEC 1981	1	0	0	0	1
	11.1				100.0
JAN 1982/DEC 1983	4	0	1	3	0
	44.4		25.0	100.0	
JAN 1984/JUL 1985	4	1	3	0	0
	44.4	100.0	75.0		
TOTAL	9	1	4	3	1
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 48-1
QC-6
LENGTH OF TIME YOUTH WAS IN SUBSTITUTE CARE
THIRD PLACEMENT EXIT DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	9 100.0	1 100.0	4 100.0	3 100.0	1 100.0
THIRD EXIT DATE					
JAN 1982/DEC 1983	2 22.2	0	1 25.0	0	1 100.0
JAN 1984/JUL 1985	7 77.8	1 100.0	3 75.0	3 100.0	0
TOTAL	9 100.0	1 100.0	4 100.0	3 100.0	1 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 49-1
QC-6TOT
DERIVED VARIABLE
TOTAL MONTHS IN CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESECENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
TOTAL MONTHS					
UNDER 1 YEAR	47 15.4	11 13.1	22 27.2	8 11.9	6 8.2
1-3 YEARS	113 37.0	36 42.9	38 46.9	23 34.3	16 21.9
3-5 YEARS	41 13.4	15 17.9	8 9.9	12 17.9	6 8.2
5-10 YEARS	47 15.4	15 17.9	7 8.6	9 13.4	16 21.9
OVER 10 YEARS	52 17.0	6 7.1	4 4.9	13 19.4	29 39.7
MISSING DATA	5 1.6	1 1.2	2 2.5	2 3.0	0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 50-1
QC-7A
HISTORY OF LIVING ARRANGEMENTS WHILE IN LAST PLACEMENT
LAST LIVING ARRANGEMENT BEGINNING DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
BEGINNING DATE					
JAN 1964/DEC 1969	13	0	0	3	10
	4.3			4.5	13.7
JAN 1970/DEC 1974	10	1	0	4	5
	3.3	1.2		6.0	6.8
JAN 1975/DEC 1979	11	2	0	4	5
	3.6	2.4		6.0	6.8
JAN 1980/DEC 1981	24	4	1	11	8
	7.9	4.8	1.2	16.4	11.0
JAN 1982/DEC 1983	85	24	23	22	16
	27.9	28.6	28.4	32.8	21.9
JAN 1984/JAN 1986	155	51	55	21	28
	50.8	60.7	67.9	31.3	38.4
DON'T KNOW	1	0	1	0	0
	.3		1.2		
MISSING DATA	6	2	1	2	1
	2.0	2.4	1.2	3.0	1.4
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 51-1
QC-7A
HISTORY OF LIVING ARRANGEMENTS WHILE IN LAST PLACEMENT
LAST LIVING ARRANGEMENT ENDING DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
ENDING DATE					
JAN 1982/DEC 1983	14 4.6	1 1.2	8 9.9	2 3.0	3 4.1
JAN 1984/JAN 1986	285 93.4	81 96.4	70 86.4	65 97.0	69 94.5
DON'T KNOW	1 .3	0	1 1.2	0	0
MISSING DATA	5 1.6	2 2.4	2 2.5	0	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 52-1
HISTORY OF LIVING ARRANGMENTS WHILE IN LAST PLACEMENT
LAST LIVING ARRANGEMENT WHILE IN CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
LIVING ARRANGEMENT WHILE IN CARE					
FOSTER FAMILY HOME	139	54	3	39	43
	45.6	64.3	3.7	58.2	58.9
GROUP HOME FOR CHILDREN	31	11	12	2	6
	10.2	13.1	14.8	3.0	8.2
EMERGENCY SHELTER CARE	11	1	7	1	2
	3.6	1.2	8.6	1.5	2.7
CHILD CARE FACILITY	43	12	13	8	10
	14.1	14.3	16.0	11.9	13.7
INDEPENDENT LIVING	45	1	38	2	4
	14.8	1.2	46.9	3.0	5.5
ALL OTHER	14	2	1	9	2
	4.6	2.4	1.2	13.4	2.7
ARRANGEMENT UNKNOWN OR UNREPORTED	22	3	7	6	6
	7.2	3.6	8.6	9.0	8.2
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 53-1
QC-7B
HISTORY OF LIVING ARRANGEMENTS WHILE IN LAST PLACEMENT
PREVIOUS LIVING ARRANGEMENT BEGINNING DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	249 100.0	77 100.0	65 100.0	48 100.0	59 100.0
BEGINNING DATE					
JAN 1964/DEC 1969	13 5.2	0	0	3 6.2	10 16.9
JAN 1970/DEC 1974	6 2.4	1 1.3	0	3 6.2	2 3.4
JAN 1975/DEC 1979	16 6.4	1 1.3	1 1.5	2 4.2	12 20.3
JAN 1980/DEC 1981	26 10.4	3 3.9	10 15.4	8 16.7	5 8.5
JAN 1982/DEC 1983	100 40.2	38 49.4	28 43.1	19 39.6	15 25.4
JAN 1984/JAN 1986	82 32.9	32 41.6	25 38.5	13 27.1	12 20.3
DON'T KNOW	1 .4	0	1 1.5	0	0
MISSING DATA	5 2.0	2 2.6	0	0	3 5.1
TOTAL	249 100.0	77 100.0	65 100.0	48 100.0	59 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 54-1
QC-7B
HISTORY OF LIVING ARRANGEMENTS WHILE IN LAST PLACEMENT
PREVIOUS LIVING ARRANGEMENT ENDING DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	249	77	65	48	59
	100.0	100.0	100.0	100.0	100.0
ENDING DATE					
JAN 1964/DEC 1969	7	0	0	2	5
	2.8			4.2	8.5
JAN 1970/DEC 1974	7	0	0	3	4
	2.8			6.2	6.8
JAN 1975/DEC 1979	6	1	1	1	3
	2.4	1.3	1.5	2.1	5.1
JAN 1980/DEC 1981	15	2	2	5	6
	6.0	2.6	3.1	10.4	10.2
JAN 1982/DEC 1983	66	21	13	17	15
	26.5	27.3	20.0	35.4	25.4
JAN 1984/JUL 1985	140	49	48	20	23
	56.2	63.6	73.8	41.7	39.0
DON'T KNOW	1	0	1	0	0
	.4		1.5		
MISSING DATA	7	4	0	0	3
	2.8	5.2			5.1
TOTAL	249	77	65	48	59
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 55-1
HISTORY OF LIVING ARRANGMENTS WHILE IN LAST PLACEMENT
PREVIOUS LIVING ARRANGEMENT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	249	77	65	48	59
	100.0	100.0	100.0	100.0	100.0
LIVING ARRANGEMENT WHILE IN CARE					
FOSTER FAMILY HOME	99	38	10	23	28
	39.8	49.4	15.4	47.9	47.5
GROUP HOME FOR CHILDREN	35	15	16	2	2
	14.1	19.5	24.6	4.2	3.4
EMERGENCY SHELTER CARE	28	10	6	8	4
	11.2	13.0	9.2	16.7	6.8
CHILD CARE FACILITY	47	5	25	3	14
	18.9	6.5	38.5	6.2	23.7
INDEPENDENT LIVING	1	0	1	0	0
	.4		1.5		
ALL OTHER	16	3	0	7	6
	6.4	3.9		14.6	10.2
ARRANGEMENT UNKNOWN OR UNREPORTED	23	6	7	5	5
	9.2	7.8	10.8	10.4	8.5
TOTAL	249	77	65	48	59
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 56-1
QC-7C
HISTORY OF LIVING ARRANGEMENTS WHILE IN LAST PLACEMENT
SECOND PREVIOUS LIVING ARRANGEMENT BEGINNING DATE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	192	65	44	37	46
	100.0	100.0	100.0	100.0	100.0
BEGINNING DATE					
JAN 1964/DEC 1969	9	0	0	1	8
	4.7			2.7	17.4
JAN 1970/DEC 1974	7	0	0	3	4
	3.6			8.1	8.7
JAN 1975/DEC 1979	20	5	2	2	11
	10.4	7.7	4.5	5.4	23.9
JAN 1980/DEC 1981	29	8	10	6	5
	15.1	12.3	22.7	16.2	10.9
JAN 1982/DEC 1983	76	31	18	17	10
	39.6	47.7	40.9	45.9	21.7
JAN 1984/JAN 1986	43	19	13	6	5
	22.4	29.2	29.5	16.2	10.9
DON'T KNOW	1	0	1	0	0
	.5		2.3		
MISSING DATA	5	2	0	0	3
	2.6	3.1			6.5
TOTAL	190	65	44	35	46
	99.0	100.0	100.0	94.6	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 57-1
QC-7A
HISTORY OF LIVING ARRANGEMENTS WHILE IN LAST PLACEMENT
SECOND PREVIOUS LIVING ARRANGEMENT ENDING DATE

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	192 100.0	65 100.0	44 100.0	37 100.0	46 100.0
ENDING DATE					
JAN 1964/DEC 1969	7 3.6	0	0	1 2.7	6 13.0
JAN 1970/DEC 1974	4 2.1	0	0	2 5.4	2 4.3
JAN 1975/DEC 1979	14 7.3	1 1.5	1 2.3	1 2.7	11 23.9
JAN 1980/DEC 1981	22 11.5	3 4.6	8 18.2	6 16.2	5 10.9
JAN 1982/DEC 1983	77 40.1	32 49.2	19 43.2	17 45.9	9 19.6
JAN 1984/JUL 1985	60 31.2	25 38.5	15 34.1	10 27.0	10 21.7
DON'T KNOW	1 .5	0	1 2.3	0	0
MISSING DATA	7 3.6	4 6.2	0	0	3 6.5
TOTAL	192 100.0	65 100.0	44 100.0	37 100.0	46 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 58-1
C-7C
HISTORY OF LIVING ARRANGMENTS WHILE IN LAST PLACEMENT
PREVIOUS LIVING ARRANGEMENTS

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	192	65	44	37	46
	100.0	100.0	100.0	100.0	100.0
LIVING ARRANGEMENT WHILE IN CARE					
FOSTER FAMILY HOME	76	29	6	18	23
	39.6	44.6	13.6	48.6	50.0
GROUP HOME FOR CHILDREN	20	13	5	1	1
	10.4	20.0	11.4	2.7	2.2
EMERGENCY SHELTER CARE	32	8	13	6	5
	16.7	12.3	29.5	16.2	10.9
CHILD CARE FACILITY	27	1	13	4	9
	14.1	1.5	29.5	10.8	19.6
ALL OTHER	10	3	0	4	3
	5.2	4.6		10.8	6.5
ARRANGEMENT UNKNOWN OR UNREPORTED	27	11	7	4	5
	14.1	16.9	15.9	10.8	10.9
TOTAL	192	65	44	37	46
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 59-1
QSUM-TOT
SUMMARY - TOTAL NUMBER OF LIVING ARRANGEMENT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SUMMARY TOTAL					
1	56 18.4	7 8.3	16 19.8	19 28.4	14 19.2
2-3	126 41.3	30 35.7	41 50.6	22 32.8	33 45.2
4-6	82 26.9	32 38.1	16 19.8	20 29.9	14 19.2
OVER 6	39 12.8	14 16.7	7 8.6	6 9.0	12 16.4
MISSING DATA	2 .7	1 1.2	1 1.2	0	0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 60-1
NUMBER OF RUNAWAY EPISODES WHILE IN SUBSTITUTE CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL RESPOMDENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
NUMBER OF RUNAWAY EPISODES					
0	133 43.6	28 33.3	33 40.7	42 62.7	30 41.1
1-2	72 23.6	24 28.6	18 22.2	16 23.9	14 19.2
3-6	38 12.5	19 22.6	6 7.4	4 6.0	9 12.3
OVER 6	14 4.6	7 8.3	5 6.2	1 1.5	1 1.4
NOT STATED	48 15.7	6 7.1	19 23.5	4 6.0	19 26.0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 61-1
WAS YOUTH FREED FOR ADOPTION

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
WAS YOUTH FREED FOR ADOPTION					
YES	21 6.9	3 3.6	2 2.5	8 11.9	8 11.0
NO	276 90.5	80 95.2	74 91.4	59 88.1	63 86.3
MISSING DATA	8 2.6	1 1.2	5 6.2	0	2 2.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 62-1
WAS YOUTH PLACED IN ADOPTIVE HOME

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	21 100.0	3 100.0	2 100.0	8 100.0	8 100.0
WAS YOUTH PLACED IN ADOPTIVE HOME					
YES	6 28.6	2 66.7	0	4 50.0	0
NO	15 71.4	1 33.3	2 100.0	4 50.0	8 100.0
TOTAL	21 100.0	3 100.0	2 100.0	8 100.0	8 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 63-1
AT WHAT AGE WAS YOUTH PLACED IN ADOPTIVE HOME ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	6	2	0	4	0
	100.0	100.0		100.0	
AT WHAT AGE WAS YOUTH PLACED IN ADOPTIVE HOME					
TOTAL ADOLESECNTS	6	2	0	4	0
	100.0	100.0		100.0	
AGE					
UNDER 1 YR	1	0	0	1	0
	16.7			25.0	
4 YRS. OF AGE	1	1	0	0	0
	16.7	50.0			
7 YRS. OF AGE	2	1	0	1	0
	33.3	50.0		25.0	
14 YRS. OF AGE	1	0	0	1	0
	16.7			25.0	
16 YRS. OF AGE	1	0	0	1	0
	16.7			25.0	
TOTAL	6	2	0	4	0
	100.0	100.0		100.0	

INDEPENDENT LIVING FOR ADOLESCENTS
Table 64-1
WAS THERE AN ADOPTION DISRUPTION

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
WAS THERE AN ADOPTION DISRUPTION	0	0	0	0	0
YES	6	2	0	4	0
	2.0	2.4		6.0	
NO	299	82	81	63	73
	98.0	97.6	100.0	94.0	100.0
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 65-1
Q-C10C
REASONS FOR ADOPTION DISRUPTION

		SITE			
	TOTAL	01	02	03	04
TOTAL RESPONDENTS	6 100.0	2 100.0	0	4 100.0	0
REASONS FOR ADOPTION DISRUPTION					
PROBLEM RELATED TO CONDUCT OR CONDITION OF ADOPTED YOUTH-	2 33.3	0	0	2 50.0	0
PROBLEM RELATED TO CONDUCT OR CONDITION OF ADOPTIVE PARENT	4 66.7	2 100.0	0	2 50.0	0
TOTAL	6 100.0	2 100.0	0	4 100.0	0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 66-1
Q-C11
HAS YOUTH EVER BEEN PLACED IN SUBSTITUTE CARE THROUGH ANOTHER AGENCY-SYSTEM ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
ANOTHER AGENCY/ SYSTEM					
YES	57 18.7	19 22.6	15 18.5	13 19.4	10 13.7
NO	243 79.7	63 75.0	63 77.8	54 80.6	63 86.3
MISSING DATA	5 1.6	2 2.4	3 3.7	0	0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 67-1
Q-C12
WHAT AGENCY OR SYSTEM PLACED YOUTH IN SUBSTITUE CARE ?

AGENCY OR SYSTEM	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
JUVENILE COURT SYSTEM	31 54.4	9 47.4	7 46.7	9 69.2	6 60.0
MENTAL HEALTH SYSTEM	11 19.3	3 15.8	6 40.0	1 7.7	1 10.0
PRIVATE AGENCY PLACEMENT	5 8.8	1 5.3	1 6.7	0	3 30.0
OTHER	5 8.8	3 15.8	0	2 15.4	0
MISSING DATA	5 8.8	3 15.8	1 6.7	1 7.7	0
TOTAL	57 100.0	19 100.0	15 100.0	13 100.0	10 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 68-1
Q-C13MA
DURING THE LAST YEAR THAT YOUTH WAS IN SUBSTITUE CARE, HOW OFTEN DID THE PARENT VISIT ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
MOTHER					
NOT AT ALL	111	28	13	42	28
	36.4	33.3	16.0	62.7	38.4
LESS THAN ONCE A WEEK	34	10	5	10	9
	11.1	11.9	6.2	14.9	12.3
1 OR 2 TIMES PER MONTH	37	10	15	6	6
	12.1	11.9	18.5	9.0	8.2
3 OR 4 TIMES PER MONTH	15	6	2	1	6
	4.9	7.1	2.5	1.5	8.2
MORE THAN ONCE A WEEK	5	0	0	0	5
	1.6				6.8
PHYSICALLY UNABLE TO VISIT	9	1	2	1	5
	3.0	1.2	2.5	1.5	6.8
UNKNOWN OR NOT REPORTED	94	29	44	7	14
	30.8	34.5	54.3	10.4	19.2
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 69-1
Q-C13PA
DURING THE LAST YEAR THAT YOUTH WAS IN SUBSTITUE CARE, HOW OFTEN DID THE PARENT VISIT ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
FATHER					
NOT AT ALL	144	39	21	49	35
	47.2	46.4	25.9	73.1	47.9
LESS THAN ONCE A WEEK	28	8	2	8	10
	9.2	9.5	2.5	11.9	13.7
1 OR 2 TIMES PER MONTH	14	1	10	0	3
	4.6	1.2	12.3		4.1
3 OR 4 TIMES PER MONTH	6	3	1	0	2
	2.0	3.6	1.2		2.7
MORE THAN ONCE A WEEK	2	1	0	0	1
	.7	1.2			1.4
PHYSICALLY UNABLE TO VISIT	5	1	0	3	1
	1.6	1.2		4.5	1.4
UNKNOWN OR NOT REPORTED	106	31	47	7	21
	34.8	36.9	58.0	10.4	28.8
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 70-1
Q-C14MA
DURING THE LAST YEAR THAT YOUTH WAS IN SUBSTITUTE CARE, HOW OFTEN DID THE PARENT MAKE OTHER TYPES OF CONTACTS, SUCH AS PHONE CALLS OR LETTERS
WITH THE SUBJECT ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
MOTHER					
NOT AT ALL	103 33.8	22 26.2	14 17.3	36 53.7	31 42.5
LESS THAN ONCE A MONTH	32 10.5	13 15.5	5 6.2	6 9.0	8 11.0
1 OR 2 TIMES PER MONTH	35 11.5	6 7.1	14 17.3	9 13.4	6 8.2
3 OR 4 TIMES PER MONTH	15 4.9	6 7.1	3 3.7	2 3.0	4 5.5
MORE THAN ONCE A WEEK	5 1.6	0	0	0	5 6.8
UNKNOWN OR UNREPORTED	115 37.7	37 44.0	45 55.6	14 20.9	19 26.0
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 71-1
Q-C14PA
DURING THE LAST YEAR THAT YOUTH WAS IN SUBSTITUTE CARE, HOW OFTEN DID THE PARENT MAKE OTHER TYPES OF CONTACTS, SUCH AS PHONE CALLS OR LETTER WITH THE SUBJECT ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
FATHER					
NOT AT ALL	136	39	16	46	35
	44.6	46.4	19.8	68.7	47.9
LESS THAN ONCE A MONTH	24	4	4	6	10
	7.9	4.8	4.9	9.0	13.7
1 OR 2 TIMES PER MONTH	18	0	11	3	4
	5.9		13.6	4.5	5.5
3 OR 4 TIMES PER MONTH	7	1	2	0	4
	2.3	1.2	2.5		5.5
MORE THAN ONCE A WEEK	2	1	0	0	1
	.7	1.2			1.4
UNKNOWN OR UNREPORTED	118	39	48	12	19
	38.7	46.4	59.3	17.9	26.0
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 72-1
Q-D1
INITIAL CASE PLAN GOAL

INITIAL CASE PLAN GOAL	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
CARETAKER WITH WHOM YOUTH PREVIOUSLY RESIDED	142 46.6	38 45.2	35 43.2	33 49.3	36 49.3
CARETAKER WITH WHOM YOUTH HAD NOT PREVIOUSLY RESIDED	34 11.1	10 11.9	2 2.5	13 19.4	9 12.3
NON-FINALIZED ADOPTIVE HOME	5 1.6	1 1.2	0	2 3.0	2 2.7
FINALIZED ADOPTIVE HOME	3 1.0	1 1.2	0	2 3.0	0
INDEPENDENT COMMUNITY LIVING	27 8.9	4 4.8	14 17.3	5 7.5	4 5.5
LONG TERM SUBSTITUTE CARE	61 20.0	24 28.6	18 22.2	3 4.5	16 21.9
NO PERMANENT PLAN GOAL	19 6.2	2 2.4	8 9.9	4 6.0	5 6.8
GOAL UNKNOWN OR UNREPORTED	14 4.6	4 4.8	4 4.9	5 7.5	1 1.4
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 73-1
Q-D2
DATE OF MOST RECENT PERIODIC CASE REVIEW

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
DATE OF MOST RECENT PERIODIC CASE REVIEW					
BEFORE 1983	4 1.3	1 1.2	0	2 3.0	1 1.4
JAN 1983/DEC 1983	10 3.3	2 2.4	5 6.2	2 3.0	1 1.4
JAN 1984/DEC 1984	110 36.1	15 17.9	23 28.4	36 53.7	36 49.3
JAN 1985/JAN 1986	133 43.6	58 69.0	31 38.3	16 23.9	28 38.4
TOTAL	257 84.3	76 90.5	59 72.8	56 83.6	66 90.4

INDEPENDENT LIVING FOR ADOLESCENTS
Table 74-1
Q-D3
RECOMMENDATION FROM MOST RECENT PERIODIC REVIEW:

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
RECOMMENDATION FROM MOST RECENT PERIODIC REVIEW					
CARETAKER WITH WHOM YOUTH HAD PREVIOSLY RESIDED	53 17.4	15 17.9	11 13.6	5 7.5	22 30.1
CARETAKER WITH WHOM YOUTH HAD NOT PREVIOUSLY RESIDED	15 4.9	5 6.0	1 1.2	4 6.0	5 6.8
FINALIZED ADOPTIVE HOME	1 .3	1 1.2	0	0	0
INDEPENDENT COMMUNITY LIVING	103 33.8	20 23.8	39 48.1	32 47.8	12 16.4
CONTINUE PLACEMENT -SPECIFIED TIME	26 8.5	6 7.1	2 2.5	3 4.5	15 20.5
CONTINUE PLACEMENT -UNSPECIFIED TIME	41 13.4	21 25.0	2 2.5	10 14.9	8 11.0
CHANGE CURRENT PLACEMENT	3 1.0	2 2.4	0	1 1.5	0
OTHER	12 3.9	7 8.3	2 2.5	2 3.0	1 1.4
COMMITTED TO JUVENILE AUTHORITY	3 1.0	2 2.4	1 1.2	0	0

Continued...

INDEPENDENT LIVING FOR ADOLESCENTS
Table 74-1
Q-D3
RECOMMENDATION FROM MOST RECENT PERIODIC REVIEW:

		SITE			
	TOTAL	01	02	03	04
TRANSFERRED TO DEPARTMENT OF INSTITUTIONS	2 .7	0	2 2.5	0	0
IN-HOUSE SERVICES	1 .3	0	1 1.2	0	0
PERMANENT FOSTER CARE	6 2.0	0	0	0	6 8.2
MISSING DATA	39 12.8	5 6.0	20 24.7	10 14.9	4 5.5
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 75-1
Q-D4
DOES RECOMMENDATION INCLUDE PROVISIONS OF SERVICES TO PREPARE ADOLESCENT FOR INDEPENDENT LIVING ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	103	20	39	32	12
	100.0	100.0	100.0	100.0	100.0
INCLUDE PROVISIONS ?					
YES	66	13	31	13	9
	64.1	65.0	79.5	40.6	75.0
NO	32	6	4	19	3
	31.1	30.0	10.3	59.4	25.0
MISSING DATA	5	1	4	0	0
	4.9	5.0	10.3		
TOTAL	103	20	39	32	12
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 76-1
Q-D5
DATE OF MOST RECENT DISPOSITIONAL HEARING:

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
MOST RECENT HEARING					
BEFORE 1983	29	0	0	16	13
	9.5			23.9	17.8
JAN 1983/DEC 1983	21	2	2	11	6
	6.9	2.4	2.5	16.4	8.2
JAN 1984/DEC 1984	78	12	20	16	30
	25.6	14.3	24.7	23.9	41.1
JAN 1985/JAN 1986	123	63	30	11	19
	40.3	75.0	37.0	16.4	26.0
TOTAL	304	84	80	67	73
	99.7	100.0	98.8	100.0	100.0
MISSING DATA	53	7	28	13	5
	17.4	8.3	34.6	19.4	6.8
TOTAL	304	84	80	67	73
	99.7	100.0	98.8	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 77-1
Q-D6
AGENCY RECOMMENDATION FOR RECENT DISPOSITIONAL HEARING:

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
RECOMMENDATION FOR RECENT HEARING					
CARETAKER WITH WHOM YOUTH HAD PREVIOSLY RESIDED	43	12	10	5	16
	14.1	14.3	12.3	7.5	21.9
CARETAKER WITH WHOM YOUTH HAD NOT PREVIOUSLY RESIDED	13	3	0	8	2
	4.3	3.6		11.9	2.7
FINALIZED ADOPTIVE HOME	2	1	0	1	0
	.7	1.2		1.5	
INDEPENDENT COMMUNITY LIVING	81	19	33	17	12
	26.6	22.6	40.7	25.4	16.4
CONTINUE PLACEMENT -SPECIFIED TIME	23	6	0	7	10
	7.5	7.1		10.4	13.7
CONTINUE PLACEMENT -UNSPECIFIED TIME	37	17	1	10	9
	12.1	20.2	1.2	14.9	12.3
CHANGE CURRENT PLACEMENT	5	1	0	3	1
	1.6	1.2		4.5	1.4
COMMITTED TO JUVENILE AUTHORITY	24	15	6	3	0
	7.9	17.9	7.4	4.5	
TO BE SENTENCED AS SEEN FIT BY COURT	4	2	1	1	0
	1.3	2.4	1.2	1.5	

Continued...

INDEPENDENT LIVING FOR ADOLESCENTS
Table 77-1
Q-D6
AGENCY RECOMMENDATION FOR RECENT DISPOSITIONAL HEARING:

	TOTAL	SITE 01	02	03	04
INTENSIVE CARE HOSPITALIZED	1 .3	1 1.2	0	0	0
JOB CORP	1 .3	0	1 1.2	0	0
TRANSFERRED TO DEPARTMENT OF INSTITUTIONS	2 .7	0	2 2.5	0	0
PERNAMENT FOSTER CARE	17 5.6	0	0	0	17 23.3
MISSING DATA	52 17.0	7 8.3	27 33.3	12 17.9	6 8.2
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 78-1
Q-D7
DOES RECOMMENDATION INCLUDE PROVISION OF SERVICES TO PREPARE ADOLESCENT FORINDEPENDENT LIVING ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	81 100.0	19 100.0	33 100.0	17 100.0	12 100.0
INCLUDE PROVISIONS ?					
YES	53 65.4	13 68.4	29 87.9	4 23.5	7 58.3
NO	23 28.4	4 21.1	4 12.1	12 70.6	3 25.0
MISSING DATA	5 6.2	2 10.5	0	1 5.9	2 16.7
TOTAL	81 100.0	19 100.0	33 100.0	17 100.0	12 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 79-1
Q-D8
DECISION OR RECOMMENDATION FROM MOST RECENT DISPOSITIONAL HEARING

		SITE			
	TOTAL	01	02	03	04
INTENSIVE	1 .3	0	0	1 1.5	0
COMMITTED TO JUVENILE AUTHORITY	4 1.3	3 3.6	0	0	1 1.4
JOB CORPS	1 .3	0	1 1.2	0	0
TRANSFERRED TO DEPARTMENT OF INSTITUTIONS	3 1.0	0	3 3.7	0	0
PERNAMENT FOSTER CARE	13 4.3	0	0	0	13 17.8
MISSING DATA	55 18.0	8 9.5	29 35.8	13 19.4	5 6.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 79-1
Q-D8

DECISION OR RECOMMENDATION FROM MOST RECENT DISPOSITIONAL HEARING

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
DECISION FROM MOST RECENT HEARING					
CARETAKER WITH WHOM YOUTH HAD PREVIOSLY RESIDED	48 15.7	15 17.9	8 9.9	6 9.0	19 26.0
CARETAKER WITH WHOM YOUTH HAD NOT PREVIOUSLY RESIDED	15 4.9	6 7.1	1 1.2	7 10.4	1 1.4
NON-FINALIZED ADOPTIVE HOME	1 .3	1 1.2	0	0	0
FINALIZED ADOPTIVE HOME	2 .7	0	0	2 3.0	0
INDEPENDENT COMMUNITY LIVING	71 23.3	20 23.8	33 40.7	11 16.4	7 9.6
CONTINUE PLACEMENT -SPECIFIED TIME	27 8.9	6 7.1	0	13 19.4	8 11.0
CONTINUE PLACEMENT -UNSPECIFIED TIME	31 10.2	10 11.9	0	6 9.0	15 20.5
CHANGE CURRENT PLACEMENT	8 2.6	0	1 1.2	4 6.0	3 4.1
DISMISSAL	23 7.5	14 16.7	5 6.2	3 4.5	1 1.4
RUNAWAY	2 .7	1 1.2	0	1 1.5	0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 80-1
Q-D9
DOES RECOMMENDATION INCLUDE PROVISION OF SERVICES TO PREPARE ADOLESCENT FOR INDEPENDENT LIVING ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	71	20	33	11	7
	100.0	100.0	100.0	100.0	100.0
INCLUDE PROVISIONS ?					
YES	47	13	29	2	3
	66.2	65.0	87.9	18.2	42.9
NO	22	7	4	9	2
	31.0	35.0	12.1	81.8	28.6
MISSING DATA	2	0	0	0	2
	2.8				28.6
TOTAL	71	20	33	11	7
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 81-1
Q-D10
IMPLEMENTATION STATUS OF MOST RECENT DISPOSITIONAL HEARING DECISION:

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
IMPLEMENTION STATUS					
DECISION IMPLEMENTED BY AGENCY	215 70.5	62 73.8	50 61.7	48 71.6	55 75.3
DECISION NOT IMPLEMENTED BY AGENCY	14 4.6	6 7.1	0	3 4.5	5 6.8
PARTIAL IMPLEMENTATION	10 3.3	3 3.6	0	1 1.5	6 8.2
UNABLE TO DETERMINE IMPLEMENTATION	44 14.4	3 3.6	23 28.4	13 19.4	5 6.8
MISSING DATA	22 7.2	10 11.9	8 9.9	2 3.0	2 2.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 82-1
QD-11A
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
RELATIONSHIP AND SOCIAL SKILLS

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
RELATIONSHIP AND SOCIAL SKILLS					
YES	109	32	49	7	21
	35.7	38.1	60.5	10.4	28.8
NO	168	46	25	58	39
	55.1	54.8	30.9	86.6	53.4
MISSING DATA	28	6	7	2	13
	9.2	7.1	8.6	3.0	17.8
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 83-1
QD-11B
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
INFORMATION ABOUT ALCOHOL AND DRUGS

	TOTAL	SITE 01	 02	 03	 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
ALCOHOL AND DRUGS					
YES	95 31.1	26 31.0	49 60.5	7 10.4	13 17.8
NO	182 59.7	52 61.9	25 30.9	58 86.6	47 64.4
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 84-1
QD-11C
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
INFORMATION ABOUT HEALTH CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
INFORMATION ABOUT HEALTH CARE					
YES	92 30.2	27 32.1	49 60.5	6 9.0	10 13.7
NO	185 60.7	51 60.7	25 30.9	59 88.1	50 68.5
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 85-1
QD-11D
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
INFORMATION ABOUT HEALTH INSURANCE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
HEALTH INSURANCE					
YES	80 26.2	25 29.8	49 60.5	2 3.0	4 5.5
NO	197 64.6	53 63.1	25 30.9	63 94.0	56 76.7
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 86-1
QD-11E
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
INFORMATION ABOUT SEX AND BIRTH CONTROL

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
SEX AND BIRTH CONTROLS					
YES	102	30	49	10	13
	33.4	35.7	60.5	14.9	17.8
NO	175	48	25	55	47
	57.4	57.1	30.9	82.1	64.4
MISSING DATA	28	6	7	2	13
	9.2	7.1	8.6	3.0	17.8
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 87-1
QD-11F
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
PSYCHOLOGICAL COUNSELING

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
PSYCHOLOGICAL COUNSELING					
YES	125 41.0	40 47.6	50 61.7	15 22.4	20 27.4
NO	152 49.8	38 45.2	24 29.6	50 74.6	40 54.8
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 88-1
QD-11G
INDEPENDENT LIVING SERVICES PROVIDED
PERSONAL AND HEALTH RELATED SERVICES
INFORMATION ABOUT EATING THE TYPES OF FOODS THAT ARE GOOD FOR YOU

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
GOOD TYPES OF FOOD					
YES	81 26.6	23 27.4	49 60.5	4 6.0	5 6.8
NO	196 64.3	55 65.5	25 30.9	61 91.0	55 75.3
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 89-1
QD-11H
INDEPENDENT LIVING SERVICES PROVIDED
EMPLOYMENT-RELATED SERVICES
INFORMATION ON HOW TO FIND A JOB

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
JOB INFORMATION					
YES	109 35.7	30 35.7	49 60.5	12 17.9	18 24.7
NO	168 55.1	48 57.1	25 30.9	53 79.1	42 57.5
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 90-1
QD-11I
INDEPENDENT LIVING SERVICES PROVIDED
EMPLOYMENT-RELATED SERVICES
JOB TRAINING - OJT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
JOB TRAINING					
YES	80	23	43	4	10
	26.2	27.4	53.1	6.0	13.7
NO	197	55	31	61	50
	64.6	65.5	38.3	91.0	68.5
MISSING DATA	28	6	7	2	13
	9.2	7.1	8.6	3.0	17.8
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 91-1
QD-11J
INDEPENDENT LIVING SERVICES PROVIDED
EMPLOYMENT-RELATED SERVICES
JOB TRAINING - CLASSROOM INSTRUCTION

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
JOB TRAINING - CLASSROOM INSTRUCTION					
YES	82 26.9	25 29.8	44 54.3	2 3.0	11 15.1
NO	195 63.9	53 63.1	30 37.0	63 94.0	49 67.1
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 92-1
QD-11K
INDEPENDENT LIVING SERVICES PROVIDED
FINANCIAL AND COMMUNITY SERVICES
BUDGETING SKILLS

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
BUDGETING SKILLS					
YES	98 32.1	27 32.1	49 60.5	4 6.0	18 24.7
NO	179 58.7	51 60.7	25 30.9	61 91.0	42 57.5
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 93-1
QD-11L
INDEPENDENT LIVING SERVICES PROVIDED
FINANCIAL AND COMMUNITY SERVICES
INFORMATION ABOUT THE USE OF CREDIT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
CREDIT INFORMATION					
YES	78 25.6	22 26.2	49 60.5	2 3.0	5 6.8
NO	199 65.2	56 66.7	25 30.9	63 94.0	55 75.3
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 94-1
QD-11M
INDEPENDENT LIVING SERVICES PROVIDED
FINANCIAL AND COMMUNITY SERVICES
INFORMATION ABOUT CAR INSURANCE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
CAR INSURANCE INFORMATION					
YES	84 27.5	26 31.0	49 60.5	4 6.0	5 6.8
NO	193 63.3	52 61.9	25 30.9	61 91.0	55 75.3
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 95-1
QD-11N
INDEPENDENT LIVING SERVICES PROVIDED
FINANCIAL AND COMMUNITY SERVICES
INFORMATION ABOUT COMMUNITY SERVICES

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
FINANCIAL AND COMMUNITY SERVICES					
YES	88 28.9	26 31.0	49 60.5	4 6.0	9 12.3
NO	189 62.0	52 61.9	25 30.9	61 91.0	51 69.9
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 96-1
QD-110
INDEPENDENT LIVING SERVICES PROVIDED
LIVING SKILLS
FOOD PREPARATION SKILLS

	TOTAL	SITE 01	SITE 02	SITE 03	SITE 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
JOB INFORMATION					
YES	85 27.9	26 31.0	48 59.3	2 3.0	9 12.3
NO	192 63.0	52 61.9	26 32.1	63 94.0	51 69.9
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 97-1
QD-11P
INDEPENDENT LIVING SERVICES PROVIDED
LIVING SKILLS
INFORMATION ABOUT HOW TO FIND A PLACE TO LIVE

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
INFORMATION ON FINDING A PLACE TO LIVE					
YES	89 29.2	27 32.1	49 60.5	5 7.5	8 11.0
NO	188 61.6	51 60.7	25 30.9	60 89.6	52 71.2
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 98-1
QD-11Q
INDEPENDENT LIVING SERVICES PROVIDED
LIVING SKILLS
HOUSEKEEPING SKILLS

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
HOUSEKEEPING INFORMATION					
YES	89	28	48	3	10
	29.2	33.3	59.3	4.5	13.7
NO	188	50	26	62	50
	61.6	59.5	32.1	92.5	68.5
MISSING DATA	28	6	7	2	13
	9.2	7.1	8.6	3.0	17.8
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 99-1
QD-11R
INDEPENDENT LIVING SERVICES PROVIDED
LIVING SKILLS
SHOPPING SKILLS

	TOTAL	SITE 01	 02	 03	 04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SHOPPING INFORMATION					
YES	86 28.2	28 33.3	49 60.5	2 3.0	7 9.6
NO	191 62.6	50 59.5	25 30.9	63 94.0	53 72.6
MISSING DATA	28 9.2	6 7.1	7 8.6	2 3.0	13 17.8
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 100-1
QD-11OTHER
INDEPENDENT LIVING SERVICES PROVIDED
OTHER SERVICES

		SITE			
	TOTAL	01	02	03	04
OTHER					
YES	13 4.3	8 9.5	0	5 7.5	0
NO	257 84.3	68 81.0	74 91.4	59 88.1	56 76.7
MISSING DATA	35 11.5	8 9.5	7 8.6	3 4.5	17 23.3
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 101-1
QD-13A
HAS TRAINING BEEN PROVIDED TO FOSTER PARENTS IN ANY OF THE FOLLOWING:
YOUTH'S BEHAVIOR

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
YOUTH'S BEHAVIOR					
YES	101 33.1	8 9.5	44 54.3	34 50.7	15 20.5
NO	191 62.6	67 79.8	35 43.2	33 49.3	56 76.7
MISSING DATA	13 4.3	9 10.7	2 2.5	0	2 2.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 102-1
QD-13B
HAS TRAINING BEEN PROVIDED TO FOSTER PARENTS IN ANY OF THE FOLLOWING:
PREPARING YOUTHS FOR INDEPENDENT LIVING

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
INDEPENDENT LIVING					
YES	52 17.0	2 2.4	33 40.7	5 7.5	12 16.4
NO	240 78.7	73 86.9	46 56.8	62 92.5	59 80.8
MISSING DATA	13 4.3	9 10.7	2 2.5	0	2 2.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 103-1
QD-13C
HAS TRAINING BEEN PROVIDED TO FOSTER PARENTS IN ANY OF THE FOLLOWING:
OTHER

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
OTHER					
YES	2 .7	0	0	0	2 2.7
NO	291 95.4	76 90.5	79 97.5	67 100.0	69 94.5
MISSING DATA	12 3.9	8 9.5	2 2.5	0	2 2.7
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

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INDEPENDENT LIVING FOR ADOLESCENTS
Table 104-1
Q-D14
WAS THERE A SPECIC REASON(S) THAT THE YOUTH
WAS SELECTED FOR INDEPENDENT LIVING SERVICES ?

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
SPECIFIC REASONS					
YES	84 27.5	19 22.6	44 54.3	5 7.5	16 21.9
NO	198 64.9	55 65.5	36 44.4	61 91.0	46 63.0
MISSING DATA	23 7.5	10 11.9	1 1.2	1 1.5	11 15.1
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 105-1
DID RESPONDENT RECEIVE INDEPENDENT LIVING SERVICES

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0
INDEPENDENT LIVING SERVICES					
YES	168 55.1	50 59.5	53 65.4	25 37.3	40 54.8
NO	137 44.9	34 40.5	28 34.6	42 62.7	33 45.2
TOTAL	305 100.0	84 100.0	81 100.0	67 100.0	73 100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 106-1
DID RESPONDENT HOLD A JOB WHILE IN FOSTER CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL RESPONDENYTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
JOB HELD					
YES	119	41	16	33	29
	39.0	48.8	19.8	49.3	39.7
NO	73	35	22	10	6
	23.9	41.7	27.2	14.9	8.2
MISSING DATA	113	8	43	24	38
	37.0	9.5	53.1	35.8	52.1
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 107-1
DID RESPONDENT HOLD A JOB WHILE IN FOSTER CARE

		SITE			
	TOTAL	01	02	03	04
TOTAL RESPONDENYTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
JOB HELD					
YES	119	41	16	33	29
	39.0	48.8	19.8	49.3	39.7
NO	73	35	22	10	6
	23.9	41.7	27.2	14.9	8.2
MISSING DATA	113	8	43	24	38
	37.0	9.5	53.1	35.8	52.1
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS

Table 108-1

MONTHLY FOSTER CARE PRIOR TO PLACEMENT IN INDEPENDENT LIVING ARRANGEMENT

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
FOSTER CARE PAYMENT					
90 - 299	67	0	9	13	45
	22.0		11.1	19.4	61.6
300 - 599	40	25	5	8	2
	13.1	29.8	6.2	11.9	2.7
600 - 899	19	0	18	0	1
	6.2		22.2		1.4
900 - 1499	25	0	24	0	1
	8.2		29.6		1.4
1500 - 2400	21	0	20	0	1
	6.9		24.7		1.4
MISSING DATA	133	59	5	46	23
	43.6	70.2	6.2	68.7	31.5
TOTAL	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 109-1
QE-2
COSTS FOR INDEPENDENT LIVING ARRANGEMENTS:
START-UP COSTS

		SITE			
	TOTAL	01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
AGENCY CONTRIBUTION					
NONE	267	75	73	65	54
	87.5	89.3	90.1	97.0	74.0
100	1	0	1	0	0
	.3		1.2		
243	1	0	1	0	0
	.3		1.2		
245	1	0	1	0	0
	.3		1.2		
MISSING DATA	35	9	5	2	19
	11.5	10.7	6.2	3.0	26.0
YOUTH/FAMILY CONTRIBUTION					
NONE	270	75	76	65	54
	88.5	89.3	93.8	97.0	74.0
MISSING DATA	35	9	5	2	19
	11.5	10.7	6.2	3.0	26.0

INDEPENDENT LIVING FOR ADOLESCENTS
Table 110-1
QE-2
COSTS FOR INDEPENDENT LIVING ARRANGEMENTS:
MONTHLY MAINTENANCE PAYMENTS

	TOTAL	SITE			
		01	02	03	04
TOTAL ADOLESCENTS	305	84	81	67	73
	100.0	100.0	100.0	100.0	100.0
AGENCY CONTRIBUTION					
NONE	228	74	36	65	53
	74.8	88.1	44.4	97.0	72.6
135	1	0	0	0	1
	.3				1.4
300	21	0	21	0	0
	6.9		25.9		
343	8	0	8	0	0
	2.6		9.9		
345	3	0	3	0	0
	1.0		3.7		
350	3	0	3	0	0
	1.0		3.7		
358	2	0	2	0	0
	.7		2.5		
383	1	0	1	0	0
	.3		1.2		
439	1	0	1	0	0
	.3		1.2		
500	1	1	0	0	0
	.3	1.2			
MISSING DATA	36	9	6	2	19
	11.8	10.7	7.4	3.0	26.0
YOUTH/FAMILY CONTRIBUTION					

INDEPENDENT LIVING FOR ADOLESCENTS
Table 110-1
QE-2
COSTS FOR INDEPENDENT LIVING ARRANGEMENTS:
MONTHLY MAINTENANCE PAYMENTS

		SITE			
	TOTAL	01	02	03	04
NONE	265 86.9	74 88.1	71 87.7	65 97.0	55 75.3
54	1 .3	0	1 1.2	0	0
67	1 .3	0	1 1.2	0	0
448	1 .3	0	1 1.2	0	0
MISSING DATA	37 12.1	10 11.9	7 8.6	2 3.0	18 24.7

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APPENDIX B

CASE RECORD SAMPLING STRATEGIES

Participating agencies were asked to identify as many county-level substitute care programs as necessary to provide at least 100 youth (per state)who met the following criteria:

- Were between the ages of 16-21;
- Were discharged from care on or after September 1, 1984 through August 31, 1985;
- Could be stratified by those who received independent living services and those who did not.

Based on these criteria, the final number of counties per state ranged from two to thirteen. A broad definition of independent living services was provided for the purposes of the study. However, each state was asked to categorize adolescents (received independent living services/did not receive services) based on their own definition of independent living services, and the agency's capability for identifying such youth.

Only two of the four states were able to stratify youth based on their enrollment in independent living programs. Therefore, for analytical purposes youth were identified as receiving or not receiving independent living services based on the information contained in the case records, and not the agencies' original stratification.

Participating agencies then gave us lists of all youth (identified by case number) who met the above criteria for each of the counties selected. A random sample of 100 youths was then selected for each state from the lists provided.

Due to reporting errors, the agencies' lists of youth occasionally included youth who had not been discharged from care, were not age 16 to 21 at the time the samples were drawn, or who were discharged before September, 1984 or after August 31, 1985.

Youth who did not fit the sampling frame were often not identifiable until the case record abstracts were complete. After receiving the case record abstracts it became apparent that agencies had defined "discharged from substitute care" inconsistently. In some instances it was youth who had left a substitute care placement, while for other youth it meant the close of the case. For this reason we allowed cases to remain in the sample which had either been discharged from a substitute care placement or closed during the designated time period. However, all cases had to have been closed by the time of the first site visit, January 1, 1986 to be included in the analyses. Therefore, a number of cases were screened out, leaving less than 100 cases per state. The final sample included the following number of cases from each state:

	Total cases in sample frame	Sample size
State A:	425	84 cases
State B:	139	81 cases
State C:	120	67 cases
State D:	203	73 cases
Total	887	305 cases

Based on the case record abstract, 165 of the sampled adolescents received at least one service and 140 adolescents did not receive any services.

The precision of any estimate depends on both the true value of what is estimated and on the standard error (SE) associated with the sample. The standard error indicates how discrepant an estimate from the sample might be drawn from the true value of the characteristic in the population. When one is interested in estimating the proportion of a population that has a given characteristic, the standard error can be calculated according to the following formula:

$$SE = \sqrt{\frac{N-n}{N} \quad \frac{pq}{n-1}}$$

Where **N** is the size of the population of interest (i.e., the sampling frame), **n** is the size of the sample actually drawn, and the values **p** and **q** indicate the proportions of the population who truly have and who truly do not have the characteristic of interest, In the worst cases (where SE is greatest), **p** and **q** are both .5. Using this worst case assumption, the SE for each of the four sites is as follows:

Site 1	.05
Site 2	.04
Site 3	.04
Site 4	.04

Although the sampling strategy will not yield probability data for extrapolation to other states or counties within the states not included in the sample frame, it provides an important foundation for exploratory analysis of service impacts and generating hypothesis for testing in other counties and states.

APPENDIX C

DATA ANALYSIS

A sample of 305 cases randomly selected from the eligible cases at 13 county agencies within four states served as the basis for all the analyses reported here. (See Appendix B for a description of sampling strategy.) The strategy underlying the analytic approach had two parts. The first task was to obtain frequencies for the general demographic and case history characteristics of youth 16-21 who were discharged from care, specifically identifying the resources and experiences they had when they left care. Secondly, simple two way relationships between these characteristics between these characteristics and the receipt of independent living services were examined using the chi-square statistic.

General Demographic and Case History Characteristics

The overall sample distribution and case history characteristics (collected from the case record abstract sheets) is detailed in Appendix A. These frequencies are presented by state. A discussion of the pertinent characteristics was presented in Chapter 6. Those resources and experiences which could effect adolescents' self sufficiency were also discussed in Chapter 6.

Chi Square Analyses

The relationship between receipt of independent living services and demographic and case history were tested. The purpose was to identify any characteristics which had a significant effect on the receipt of independent living services. Most of these comparisons were done through chi square analyses of two-way tables which cross tabulated receipt of independent living services/no receipt of services with each of the characteristics of interest. The specific characteristics examined in this way are listed in Table C-1. Receipt of independent living services was defined as receiving one or more of the services listed in question D-11 of the case record abstract and/or indication in the case record that a youth participated in an independent living arrangement. A youth could have received up to 18 independent living services.

Table C-1. Chi square analyses of two way tables relating independent living services (ILS) to key characteristics of interest.

ILS (receipt vs. non receipt) Cross Tabulated With:	**Chi Square**	**df**	**p**
Sex	4.949	1	.02*
Disabling conditions (presence vs. absence)	4.368	1	.03*
Minority status (minority vs. nonminority)	1.452	1	.23
Job status (held a job, did not hold job while in care)	.801	1	.37
Education level[a]	1.832	2	.40
Number of runaway episodes while in care[b]	3.586	3	.31
Number of placements into substitute care[c]	3.380	2	.19
Number of living arrangements while in care[d]	12.813	3	.01*
Number of months spent in care[e]	8.602	4	.07**
Visitation by mother during the last year of care[f]	7.030	2	.03*
Visitation by father during the last year of care[g]	6.647	2	.04*
Recommendation from last periodic review[h]	16.876	4	.02*
Agency recommendation for dispositional hearing[i]	13.427	4	.01*
Recommendation from last dispositional hearing[j]	10.394	4	.03*

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*Significant findings.

**Marginally significant.

[a] Based on the following answer categories: Less than high school, some high school, graduated high school, some college.

[b] Based on the following answer categories: 0; 1-2 episodes; 3-6 episodes; over 6.

[c] Based on the following answer categories: 1, 2, 3.

[d] Based on the following answer categories: 1; 2-3; 4-6; over 6.

[e] Based on the following answer categories: 0-11; 12-36; 37-60; 61-120; over 120.

[f] Based on the following answer categories: not at all; less than once a month; once a month or more.

[g] Based on the following answer categories: not at all; less than once a month; once a month or more.

[h] Based on the following answer categories: reunification; adoption; independent living; remain in foster care; other.

[i] Based on the following answer categories: reunification; adoption; independent living; remain in foster care; other.

[j] Based on the following answer categories: reunification; adoption; independent living; remain in foster care; other.

Table C-1 shows that there is some relationship between receipt of independent living services and nine of the characteristics of interest. Each of these significant findings is * in the table and discussed in Chapter 6. We failed to find any relationship between receipt of independent living services and age, minority status, job status, education level, or number of runaway episodes while in care. It appeared that receipt of independent living sinuses was more closely related to case history characteristics then individual demographic characteristics.

In order to determine if the relationships of demographic and case history characteristics were unique to certain categories of services, the 18 independent living services were divided into four categories. These categories were:

- Personal and health related services (relationships and social skills, alcohol and drug abuse, health care, health insurance, sex and birth control, and nutrition);
- Employment related services (finding a job, on the job training, and classroom instruction job training);
- Daily living skills (food preparation, how to find a place to live, housekeeping, and shopping); and
- Financial and community services (training in budgeting, use of credit, car insurance and community services).

Table C-2 presents the chi square for the specific categories of services listed above. These relationships were only examined by those variables which showed a significant relationship with overall receipt of independent living services.

Table C-2 indicates that certain categories of independent living services influenced the relationship between overall receipt of services and key characteristics of interest. The significant relationships are starred and discussed in Chapter 6. (The percentage distribution on these characteristics is detailed in the tables in Appendix A, and will not be reiterated here.)

Table C-2. Chi square analyses of two way tables relating categories of independent living services (ILS) to characteristics which had a significant relationship to overall receipt of independent living services.

ILS (receipt vs. non receipt) Cross Tabulated With:	Chi Square	df	p
Personal and health related services with:			
Sex	4.376	1	.03*
Disabling condition	3.314	1	.06**
Number of living arrangements	14.940	3	.00
Number of months in care	8.071	4	.07**
Visitation by mother during last year	7.011	2	.03*
Visitation by father during last year	5.448	2	.07**
Recommendation from last periodic review	14.841	4	.01
Agency recommendation for dispositional hearing	12.441	4	.01
Recommendation from last dispositional hearing	11.661	4	.02
Employment related services with:			
Sex	.042	1	.84
Disabling condition	3.852	1	.05*
Number of living arrangements	16.814	3	.00*
Number of months in care	8.178	4	.08**
Visitation by mother during last year	1.416	2	.49
Visitation by father during last year	.488	2	.78
Recommendation from last periodic review	32.487	4	.00*
Agency recommendation for dispositional hearing	26.847	4	.00*
Recommendation from last dispositional hearing	26.260	4	.00*
Daily living skills with:			
Sex	1.369	1	.24
Disabling condition	.054	1	.82
Number of living arrangements	14.031	3	.00*
Number of months in care	2.369	4	.67
Visitation by mother during last year	1.746	2	.42
Visitation by father during last year	.093	2	.95
Recommendation from last periodic review	29.471	4	.00*
Agency recommendation for dispositional hearing	25.388	4	.00*
Recommendation from last dispositional hearing	37.618	4	.00*

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*Significant relationships.

**Marginal relationships.

Table C-2. Chi square analyses of two way tables relating categories of independent living services (ILS) to characteristics which had a significant relationship to overall receipt of independent living services. (Continued)

ILS (receipt vs. non receipt) Cross Tabulated With:	**Chi Square**	df	p
Financial and community services with:			
Sex	.084	1	.77
Disabling condition	.015	1	.90
Number of living arrangements	7.401	3	.06**
Number of months in care	4.160	4	.385
Visitation by mother during last year	.783	2	.67
Visitation by father during last year	1.413	2	.49
Recommendation from last periodic review	35.414	4	.00*
Agency recommendation for dispositional hearing	26.081	4	.00*
Recommendation from last dispositional hearing	34.230	4	.00*

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*Significant relationships.

**Marginal relationships.